Division of Corporations Public Access System

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To:

Division of Corporations

Fax Number

: (850)617-6383

: C T CORPORATION SYSTEM Account Name

Account Number : FCA000000023 Phone

: (850)222-1092

Fax Number

: (850)878-5926

GTG-Jax, LLC

ORIDA/FOREIGN LIMITED LIABILITY CO.

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Certificate of Status	
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Corporate Filing Menu

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10/2/2007

CT CORPORATION SYSTM

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

	-Jax, LLC		
(Must end with the words "Limited Liabili	ly Company, "LLC.," or "LLC.")		
ARTICLE II - Address: The mailing address and street address of the pri	incipal office of the Limited Liability Comp	eny is	:
Principal Office Address:	Mailing Address:		
11601 CENTRAL PARKWAY	PO Box 316		
JACKSONVILLE FL 32224	Bohemis, NY 11716		
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Registe business entity with an active Florida registration.)	ared Agent. You must designate an individual or another	07 OCT -2	DIVISION
The name and the Florida street address of the re	gistered agent are:	T-1	
Philip Shaoul	· .	Ξ	
Name		AHIII: O	
5601 Collins Avenue,	Suite 1711	07	

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S.

City, State, and Zip

Florida street address (P.O. Box NOT acceptable)

Registered Agent's Signature (REQUIRED)

Miami Beach, Florida 33140

(CONTINUED)
Page 1 of 2

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ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

Title:

"MGR" = Manager

"MGRM" = Managing Member

MGRM

Philip Shaout

PO Box 234409

Great Neck, New York 11023

MGRM

Ehsan Einsghave

48 Warwick Rd.

Great Nock, New York 11023

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: _______ (OPTIONAL) (If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

REQUIRED SIGNATURE

Signature of a mamber or an authorized representative of a member.

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

Philip Shaoul

Typed or printed name of signee

Filing Fees:

\$125.00 Filing Fac for Articles of Organization and Designation of Registered Agent
\$ 30.00 Cartifled Copy (Optional)
\$ 5.00 Cartificate of Status (Optional)

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