

Division of Corporations Public Access System

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To:

Division of Corporations

: (850)617-6383 Fax Number

From:

: EMPIRE CORPORATE KIT COMPANY

Account Name Account Number : 072450003255 (305)634-3694

: (305)633-9696 Fax Number

## FLORIDA/FOREIGN LIMITED LIABILITY CO.

## gmg group llc

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPA	NY	
ARTICLE I - Name: The name of the Limited Liability Company is:		
(Mast and with the words Limited Liability Company, Limited Colopany" or their abbreviation "LIG" or "L.C.,")		
ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company	y is:	
Principal Office Address:  345 NW 157 St  Mailing Address:  345 NW 157 St  MIQMI FL 33109  ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: (The Limited Limited Limitity Company cannot serve as in own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)	07 001 1	DIAISIUS OL
The name and the Florida street address of the registered agent are:    The name and the Florida street address of the registered agent are:   The name and the Florida street address of the registered agent are:   Name	7 ANIO: 40	

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.

at's Signature (REQUIRED)

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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: Name and Address: "MGR" = Manager "MGRM" = Managing Member (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.) **REOURED SIGNATURE:** Signature of a man ber 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.) M<u>orency</u> Typed or printed name of signee Filing Foes: \$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent H01000257301

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\$ 30.00 Certified Copy (Optional) 5 5.00 Certificate of Status (Optional)