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COVER LETTER

то:	Registration Se Division of Co					
SUBJ	ECT: G&NI	Financial LLC	d Liability Company)			
		(Name of Limite	u Liability Company)			
The er	nclosed Articles o	f Organization and fee(s) are s	ubmitted for filing.			
Please	return all corresp	ondence concerning this matte	er to the following:			
	Guinx Tous	ssaint				
		(1	Name of Person)			
	G&N Finan	cial				
		. (Firm/Company)			
	5675 Sunt	perry Circle				
		•	(Address)		<u> </u>	PV
	Fort Pierce	e, FL 34951			7 05(SECRE
		(City	/State and Zip Code)		=	윾
For fu	rther information	concerning this matter, please	call:		O7 DEC 14 AMII: 02	DIVISION OF CORPORATIONS
.			770 040 004	_	=	RAT
Guin	x Toussaint	of Person)	at (772) 940-901.		2.0	20
	(rume	or reason,	(Alea code & Daytime To	erephone (valuoer)		
Enclo	sed is a check fo	r the following amount:				
\$12	5.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	\$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$160.00 Filing Certificate of Statu Certified Copy (additional copy is encl	s &	
		Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street/Courier Addres Registration Section Division of Corporation Clifton Building 2661 Executive Center Tallahassee, FL 32301	ns		

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY CO ARTICLE I - Name: The name of the Limited Liability Company is: G & N Financial LLC (Must end with the words "Limited Liability Company, "Limited Company" or their abbreviation "LLC," or "L,C,.") ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is: Principal Office Address: **Mailing Address:** 5675 Sunberry Circle Fort Pierce, FL 34951 ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: (The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.) The name and the Florida street address of the registered agent are: **Guinx Toussaint** Name 5675 Sunberry Circle Florida street address (P.O. Box NOT acceptable) Fort Pierce City, State, and Zip 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

(CONTINUED) Page 1 of 2

Registered Agent's Signature (REQUIRED)

accept the obligations of my position as registered agent as provided for in Chapter 608, F.S..

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

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

"MGR" = Manager "MGRM" = Managing Member MGR (Use attachment if necessary) LE V: Effective date, if other than the date of the state	Guinx Toussaint 5675 Sunberry Circle Fort Pierce, FL 34951 Natchia Jules-Toussaint 5675 Sunberry Circle Fort Pierce, FL 34951
(Use attachment if necessary) LE V: Effective date, if other than the dat	
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Parking data in linkad the date was 1	te of filing: January 1st, 2008
	pecific and cannot be more than five business days p
days after the date of filing.)	
<u>REQUIRED</u> SIGNATURE:	
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1 War 12	- Work
Signature of a member of	r an authorized representative of a mamber.
(In accordance with section	n 608.408(3), Florida Statutes, the execution

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

that the facts stated herein are true.)

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

Typed or printed name of signee