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(Re	equestor's Name)	
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PICK-UP	WAIT	MAIL
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SEGRETARY OF STATE
APPASSEE, FLORIT

D. BRUCE

APR 16 2008

EXAMINER

COVER LETTER

	egistration Sec ivision of Corp					
SUBJECT	, Gorbal	d Vending, LL	С			
000000			ed Liability Compa	ny)		
The enclos	ed Articles of (Organization and fee(s) are	submitted for filing		·	
Please retu	rn all correspor	dence concerning this mat	ter to the following:			
G	lenton B	aldie				
	·		(Name of Person)			
G	orbald \	ending, LLC			7	_
			(Firm/Company)	······································	SEGF	A 80
18	343 NW	99th Ave			HAS	PR
			(Address)		SEE	0
P	lantation	, FL 33322			FLO	N N
		(Cir	y/State and Zip Code)	ATE	S.
For further	information co	ncerning this matter, pleas	e call:		D	•
Glente	on L. Ba	ldie	_at (_954)	850-734	9	
	(Name o	Person)	(Area Code	& Daytime Teleph	one Number)	
Enclosed	is a check for	the following amount:				
\$125.00	Filing Fee	\$130.00 Filing Fee & Certificate of Status	St55.00 Filing Certified Cop (additional copy	y (s enclosed)	160.00 Filing F Certificate of Sta Certified Copy additional copy is e	tus &
		Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Registration Division Clifton B 2661 Exe	urier Address on Section of Corporations uilding cutive Center Circ ee, FL 32301	ele	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:	
Gorbald Vending, LLC. (Must end with the words "Limited Liabilit	y Company, "L.L.C.," or "LL.C.")
ARTICLE II - Address: The mailing address and street address of the print	ncipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
1843 NW 99th Avenue Plantation, FL 33322	1843 NW 99th Avenue Plantation, FL 33322
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Register business entity with an active Florida registration.) The name and the Florida street address of the respectively. Shaun Balding Name 1843 NW 99 Florida street address of the respectively. City, State, ar	gistered agent are: Alence Res (P.O. Box NOT acceptable) FL 3 3 3 2 2
liability company at the place designated in the registered agent and agree to act in this capacity, statutes relating to the proper and complete per	ccept service of process for the above stated limited is certificate, I hereby accept the appointment as I further agree to comply with the provisions of all formance of my duties, and I am familiar with and tered agent as provided for in Chapter 608, F.S Tre (REQUIRED)

EFFECTIVE DATE 4-13-08

(CONTINUED)
Page 1 of 2

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

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

Title:		Name and Address:	
"MGR" = Man "MGRM" = Ma	ager anaging Member		
MGR		GLENTON BALDIE	
***************************************	ALL PROPERTY	1843 NW 99TH AVENUE	- .
		PLANTATION, FL 33322	_
MGR		SHAUN BALDIE	
		1843 NW 99TH AVENUE	
		PLANTATION, FL 33322	_
The state of the s	No. of the Control of		_
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(Use attachmer	nt if necessary)		
(-- ,	11/3/08	
	e date, if other than the dat		IONAL)
f an effective date is l or 90 days after the		pecific and cannot be more than five busines ≥∞	ss days prior
or you days arrow the		LAN LAN	8 APR
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	Signature of a member of	r an authorized representative of a member	ED PH 12: 5:
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	(In accordance with section of this document constitute that the facts stated here.	n 608.408(3), Florida Statutes, the execution es an affirmation under the penalties of perjury in are true.)	
	Glenton	Baldiè	
	Typed	or printed name of signee	

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
\$ 30.00 Certified Copy (Optional)

- \$ 5.00 Certificate of Status (Optional)