

LO8000090381

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

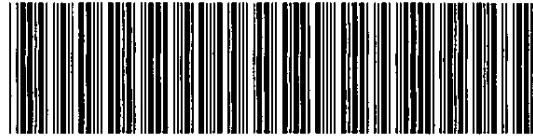
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Sharon
AUTHORIZATION
CORRECT Art V
DATE 9/23/08
DOC ENCL

Office Use Only



100135974541

09/17/08--01035--009 **125.00

FILED
08 SEP 23 PM 3:22
SECRETARY OF STATE
TALLAHASSEE FLORIDA

N. ~~09/23/08~~ SEP 23 2008

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: GIBRALTAR SERVICES, L.L.C.
(Name of Limited Liability Company)

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

DANIEL V. STRAUS
(Name of Person)

(Firm/Company)

4905 SW 11th CT
(Address)

CAPE CORAL, FL 33914
(City/State and Zip Code)

For further information concerning this matter, please call:

CHERYL M. WELLMAN at (239) 877-7125
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- ☒ \$125.00 Filing Fee ☐ \$130.00 Filing Fee & Certificate of Status ☐ \$155.00 Filing Fee & Certified Copy (additional copy is enclosed) ☐ \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

Mailing Address
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street/Courier Address
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE
Division of Corporations

September 19, 2008

DANIEL V. STRAUS
4905 SW 11TH COURT
CAPE CORAL, FL 33914

SUBJECT: GIBRALTAR SERVICES, LLC
Ref. Number: W08000043706

We have received your document for GIBRALTAR SERVICES, LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The effective date is not acceptable since it is not within five working days of the date of receipt.

This document was received in our office on 9/17/08.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6067.

Neysa Culligan
Document Specialist

Letter Number: 908A00050904

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

GIBRALTAR SERVICES, LLC.

(Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:

4905 SW 11th CT
Cape Coral, FL 33914

Mailing Address:

4905 SW 11th CT
Cape Coral, FL 33914

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:

Daniel V. Straus

Name

4905 SW 11th CT

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

Cape Coral FL 33914

City, State, and Zip

FILED
08 SEP 23 PM 3:22
SECRETARY OF STATE
TALLAHASSEE FLORIDA

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.



Registered Agent's Signature (REQUIRED)

(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:

"MGR" = Manager

"MGRM" = Managing Member

Name and Address:

MGRM

Daniel V. Straus
4905 SW 11th Ct
Cape Coral FL 33914


MGRM

Laura A. Straus
4905 SW 11th Ct
Cape Coral FL 33914

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: 10/1/2008 (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 member 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.)

Daniel V. Straus
Typed or printed name of signee

FILED
08 SEP 23 PM 3:22
SECRETARY OF STATE
TALLAHASSEE FLORIDA

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)