# 108000112801

(Requestor's Name)				
(Address)				
(Address)				
(/idd1653)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
E MAIL				
(Business Entity Name)				
,				
(Document Number)				
Certified Copies Certificates of Status				
,				
Special Instructions to Filing Officer:				
L. SELLERS				
DEC 1 0 2008				
EXAMINER				

Office Use Only



300138517923

12/09/08--01022--002 \*\*160.00

DEC -9 AM 8: 32

ANFC-9 AM A:3

# **COVER LETTER**

TO: Registration Section Division of Corporations
SUBJECT: GDR SIBLING,LLC
(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:  ** VIA FEDEX PLEASE**  RETURN AIRBILL ENCLOSED
MARC HAUSER,ESQ.
(Name of Person)
HAUSER&HAUSER,PLLC
(Firm/Company)
1111 KANE CONCOURSE (#616)
(Address)
BAY HARBOR ISLANDS,FL. 33154
(City/State and Zip Code)
For further information concerning this matter, please call:
MARC HAUSER, ESQ. at ( 305 ) 864-9934
(Name of Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
\$125.00 Filing Fee \$\times \text{\$\text{\$130.00 Filing Fee & Certificate of Status}}\$  Certificate of Status \$\text{\$\text{\$certified Copy} & Certified Copy} & Certified Copy &
Mailing AddressStreet/Courier AddressRegistration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center Circle Tallahassee, FL 32301

### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICL	Æ	ĭ	-	Na	m	e:

The name of the Limited Liability Company is:

(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:**

**Mailing Address:** 

12000 N. BAYSHORE DR (#111)

NO. MIAMI BEACH,FL 33181

12000 N. BAYSHORE DR (#111) NO. MIAMI BEACH,FL 33181

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:

1111 KANE CONCOURSE(#616)

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

BAY HARBOR ISLANDS,FL 33154
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 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:
GEORGE C. REYCRAFT(MGRM)	12000 N. BAYSHORE DR (#111)
·	NO. MIAMI BEACH,FL. 33181
SHEILAH REYCRAFT (MGRM)	345 E. 52ND ST (#1K)
	NEW YORK,N.Y. 10022
THOMAS C. REYCRAFT(MGRM)	668 ELY AVE
	PELAM, N.Y. 10803
(Use attachment if necessary)  ICLE V: Effective date, if other than the effective date is listed, the date must k	e date of filing: (OPTIONAL)  De specific and cannot be more than five business days prior
90 days after the date of filing.) In accordance with section 608	.408(3),Florida Statutes, the execution of this documen
constitutes an affirmation under true.  REQUIRED SIGNATURE: 8/	er the penalties of penjury that the facts stated herein
RECORD SIGNATURE.	ORGE OF REYCRAIT
Shulate M.	lester Thank Com
SHEILAH REYCRAF	er or an authorized representative of a member. T / THOMAS C. REYCRAFT ection 608.408(3), Florida Statutes, the execution
of this document cons that the facts stated	titutes an affirmation under the penalties of perjury
	yped or printed name of signee
	Then of himen name of signer

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)

Page 2 of 2