Public Access System

Division of Corporations

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H09000122284 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number

: (850)617-6383

L. SELLERS

MAY 1 8 2009

From:

Account Name : ARNSTEIN & LEHR LLP

Account Number : 120060000021

Phone

Fax Number

: (561)655-5551

: (561)833-9800

EXAMINER

#ELORIDA/FOREIGN LIMITED LIABILITY CO.

Gilco 2, LLC

Certificate of Status	0
Certified Copy	1
Page Count	01
Estimated Charge	\$155.00

Electronic Filing Menu

Corporate Filing Menu

(((H09000122284 3)))

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Gilco 2, LLC

ARTICLE II - Address:

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

18001 Collins Avenue, 31st Floor Sunny Isles Beach, FL 33160

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

The name and the Florida street address of the registered agent are:

David Shear, Esq.

201 Alhambra Circle, Suite 601 Florida street address (P.O. Box NOT acceptable)

> Coral Gables, FL 33134 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 possiph as registered agent as provided for in Chapter 608, F.S.

ignature

Article IV - Management (Check box if applicable,)

[X] The Limited Liability Company is to be managed by one manager or more managers and is, therefore,

a manager - managed company.

d if an effective date is requested) (An additional article mus

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.)

<u>David Shear</u>, <u>Authorized Representative</u> Typed or printed name of signee

8472125.1

(((H0900012