

Florida Department of State

Division of Corporations Public Access System

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.

(((H09000188283 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

From:

Account Name : GRAY ROBINSON, P.A.

Account Number : I2000000092

Phone

: (863)284-2200

Fax Number

: (863)688-9771

FLORIDA/FOREIGN LIMITED LIABILITY CO. GCS'FLORIDA, LLC

Certificate of Status	C C
Certified Copy	
Page Count	0.3
Estimated Charge	\$155.00

Electronic Filing Menu

Corporate Filing Menu

Help

August 26, 2009

GRAY ROBINSON, P.A.

SUBJECT: GCS FLORIDA, LLC

REF: W09000038452

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity. Section 608.406, Florida Statutes, was amended effective July 1, 2007, to require the name of a limited liability company to be distinguishable from the names of all other filings filed with the Division of Corporations, except for fictitious name registrations and general partnership registrations.

Please select a new name and make the correction in all the appropriate places. One or more words may be added to make the name distinguishable from the one presently on file. Adding of Florida or Florida to the end of the name is not acceptable. A search for name availability can be made on the Internet through the Division's records at www.sumbiz.org.

Please note the name of a limited liability company must end with the words Limited Liability Company, the abbreviation L.L.C., or the designation LLC. The word Limited may be abbreviated as Ltd. and the word Company may be abbreviated as Co. The following suffixes are no longer acceptable: Limited Company, L.C., and LC.

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 filling of your dobument, please call (850) 245-6094.

RECEIVED BE 9 SEP 15 PH 12: 34 SECRETARY OF STATE ALLAHASSEE, FLORIDA

FAX Aud. #: H09000188283

09-15-2009 12:02PM FROM-GRAY ROBINSON

863-688-9771 T-110 P.003/006 F-407

Regulatory Specialist II Letter Number: 609A 00028733

863-688-9771

2009 SEP 15 AM 9: 44

SECRETARY OF STATE
LAHASSEE, FLORIDA

(H09000188283 3)

ARTICLES OF ORGANIZATION

OF

GCS OF CENTRAL FLORIDA, LLC

The undersigned hereby present(s) these Articles of Organization for the formation of a Limited Liability Company pursuant to the Florida Limited Liability Company Act.

ARTICLE I

NAME

The name of the Limited Liability Company is GCS OF CENTRAL FLORIDA, LLC.

ARTICLE II

PRINCIPAL OFFICE

The mailing address of this Limited Liability Company is 6330 Furestwood Drive West, Lakeland, Florida 33811.

ARTICLE III

DURATION

The Limited Liability Company shall have perpetual existence, commencing on the date of the execution and acknowledgment of these Articles of Organization.

ARTICLE IV

PURPOSE

The Limited Liability Company is organized for the purpose of transacting any and all lawful business.

(HO9000188283 3)

(H09000188283 3)

2009 SEP 15 AM 9: 44

<u>ARTICLE V</u>

MANAGEMENT

The Limited Liability Company is to be a member managed company. The Limited Liability Company's initial member manager shall be Michael A. Green whose address is 6330 Forestwood Drive West, Lakeland, Florida 33811.

<u>ARTICLE VI</u>

INITIAL REGISTERED OFFICE AND INITIAL REGISTERED AGENT

The street address of the initial registered office of the Limited Liability Company is One Morton Drive, Lakeland, Florida 33801 and the name of the initial registered agent of the Limited Liability Company at that office is David D. Hallock, Jr.

ARTICLE VII

<u>INDEMNIFICATION</u>

Except to the extent otherwise provided in the Operating Agreement of the Limited Liability Company, the Limited Liability Company shall indemnify each person or entity who was or is a Member, director, officer, employee or agent of the Limited Limitity Company to the full extent permitted by law.

IN WITNESS WHEREOF, the undersigned, being an authorized representative of a Member of the Limited Liability Company, has executed these Articles of Organization this day of September, 2009.

David D. Hallock, Jr.

(H09000188283 3)

(H09000188283 3)

STATE OF FLORIDA COUNTY OF POLK

The foregoing Articles of Organization were acknowledged before me this September, 2009, by David D. Hallock, Jr. as an authorized representative of a Member of the Limited Liability Company, who is personally known to me.

SHARMAN BARE Notary Public, State of Florida My comm. expires May 27, 2012 Conim. No. DD 781822 NOTARY PUBLIC, State of Florida at Large

(Printed Name)

My commission expires:

(AFFIX NOTARY SEAL)

My commission number:

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

SECTION 608.549/ REGISTERED

PURSUANT TO THE PROVISIONS OF SECTION 608.415 AND FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY STREAM TS THE FOLLOWING THE STATEMENT DESIGNATING AGENT/REGISTERED OFFICE IN THE STATE OF FLORIDA:

- The name of the Limited Liability Company is GCS OF CENTRAL FLORIDA, LLC.
- 2. The name and street address of its initial Registered Agent and initial Registered Office are:

David D. Hallock, Jr. GrayRobinson, P.A. One Lake Morton Drive Lakeland, Florida 33801

Having been named as registered agent and to accept service of drocess 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.

> DAVID D. HALLOCK, JR. Date: September 15, 2009

(H09000188283 3)

\$16849 vl