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**EXAMINER** 



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# **COVER LETTER**

TO:	Registration Division of C				
SUBJI	ECT:	GM	IT Solutions, LLC		
	<del>-</del>	Name of Limi	ted Liability Company		
The en	closed Articles	of Organization and fee(s) are	submitted for filing.		
Please	return all corre	spondence concerning this ma	ter to the following:		
			Ted Farah		
			Name of Person		
		GM	T Solutions, LLC		
	Firm Company				
	5767 Persimmon Way				
			Address		
	Naples, FL 34110				
	City State and Zip Code				
-		usor	ders@comcast.net For future annual report notification)		
Eng free	41	·	•		
ror tur	mer informatio	n concerning this matter, pleas	е сап:		
		ed Farah	at ( 321 ) 422-4908		
	. Nam	e of Person	Area Code & Daytime Telephone Number		
Enclos	ed is a check	for the following amount:			
]\$125.	00 Filing Fee	S130,00 Filing Fee & Certificate of Status	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		

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

GMT Solution		
(Must end with the words "Limited Liabili	ty Company," "L.L.C.," or "LLC.")	
ARTICLE II - Address: The mailing address and street address of the pri	incipal office of the Limited Liability Compan	y is:
Principal Office Address:	Mailing Address:	
5767 Persimmon Way Napies, FL 34110		
ARTICLE III - Registered Agent, Registered The Limited Liability Company cannot serve as its own Registe business entity with an active Florida registration.)  Ted Fal	ered Agent. You must designate an individual or another SP	
-		
5767 Persimr Florida street address (P.O. 1		를
		77.7
Naples, FL 34110 City, State, an	d Zip	
registered agent and agree to act in this capacity. statutes relating to the proper and complete per	nis certificate. I hereby accept the appointment a L. I further agree to comply with the provisions of formance of my duties, and I am familiar with a tered agent as provided for in Chapter 608, F.S.	is Of all Ind

(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:

MGRM Gene I 7897 C Naples MGRM Marcus 855 11	nd Address:
TR97 C Naples  MGRM  Marcus 855.11 Naples  Use attachment if necessary)  E V: Effective date, if other than the date of filing ective date is listed, the date must be specific and lays after the date of filing.)  EQUIRED SIGNATURE:  Signature of a member or an author (In accordance with section 608.408(3 of this document constitutes an affirm	rah ersimmon Way FL 34110
Use attachment if necessary)  E V: Effective date, if other than the date of filing ective date is listed, the date must be specific and lays after the date of filing.)  EQUIRED SIGNATURE:  Signature of a member or an author (In accordance with section 608.408(3 of this document constitutes an affirm	l. Landrum ocobay Drive FL 34108
E V: Effective date, if other than the date of filing ective date is listed, the date must be specific and lays after the date of filing.)  EQUIRED SIGNATURE:  Signature of a member or an author (In accordance with section 608.408(3 of this document constitutes an affirm	Zillman h Avenue South FL 34102
EQUIRED SIGNATURE:  Signature of a member or an author  (In accordance with section 608.408(3 of this document constitutes an affirm	
of this document constitutes an affirm	
more with reason included into the present of the p	, Florida Statutes, the execution ation under the penalties of perjury
Ted Fa	

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)