

L090000 98391

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

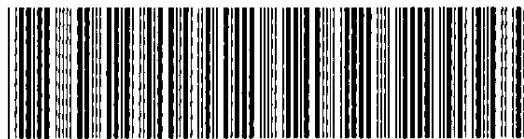
(Document Number)

Certified Copies _____

Certificates of Status _____

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10/12/09--01004--006 **155.00

RECEIVED
09 OCT 12 PM 1:31
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

FILED
09 OCT 12 PM 4:11
SECRETARY OF STATE
DIVISION OF CORPORATIONS

B. KOHR

OCT 12 2009

EXAMINER

Advanced Incorporating Service, Inc.

1317 California Street
P.O. Box 20396
Tallahassee, FL 32316

Phone: 850-222-CORP
Fax: 850-575-2724
Email: orders@advancedincorporating.com
Website: www.advancedincorporating.com

FILED
DIVISION OF CORPORATIONS
OCT 12 PM 4:11

NAME OF ENTITY

G MAR, LLC

FOR OFFICE USE ONLY

PICK ONE:

☒ CERTIFIED COPY ☐ PHOTOCOPY

FILING:

☐ CORPORATION ☒ LLC ☐ LIMITED PARTNERSHIP ☐ GENERAL PARTNERSHIP
☐ FICTITIOUS NAME ☐ SERVICEMARK/TRADEMARK ☐ AMENDMENT
☐ FOREIGN QUALIFICATION ☐ JUDGMENT LIEN
☐ OTHER _____

RETRIEVAL:

☐ GOOD STANDING CERT/C.U.S. ☐ CERTIFIED COPY ☐ PHOTOCOPY
Of _____

APOSTILLE/CERTIFICATION REQUEST:

Country _____

Amount of Documents _____

DATE 10/12/09 TIME 2:00

Notes: _____



FLORIDA DEPARTMENT OF STATE
Division of Corporations

October 12, 2009

ADVANCED INCORPORATING SERVICE, INC.
P.O. BOX 20396
TALLAHASSEE, FL

SUBJECT: GMAR, LLC
Ref. Number: W09000045441

We have received your document for GMAR, LLC and your check(s) totaling \$155.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please note that we have RETAINED your \$155.00 payment.

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an administratively dissolved/revoked entity. Names of administratively dissolved/revoked entities are not available for one year from the date of administrative dissolution/revocation unless the dissolved/revoked entity provides the Department of State with an affidavit or letter stating that they have no intention of reinstating, therefore, releasing the name for use to another entity.

Adding "of Florida" or "Florida" to the end of a name is not acceptable.

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) 245-6914.

Buck Kohr
Regulatory Specialist II

Letter Number: 409A00032762

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
09 OCT 12 PM 4:11

ARTICLES OF ORGANIZATION FOR
GMRM, LLC
A FLORIDA LIMITED LIABILITY COMPANY

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
09 OCT 12 PM 4:11

ARTICLE I - NAME

The name of the Limited Liability Company is: **GMRM, LLC**

ARTICLE II - ADDRESS

The mailing address and street address of the principal office of the Limited Liability Company is: **10137 Midas Drive, Port Richey, Florida 34668**

ARTICLE III - DURATION

The period of duration for the Limited Liability Company shall be: **Until dissolved pursuant to its Operating Agreement.**

ARTICLE IV - MANAGEMENT

The Limited Liability Company is to be managed by the members. The names and addresses of the managing members are:

**George P. Maniates
10137Midas Drive
Port Richey, Florida 34668**

**Marian F. Maniates
10137Midas Drive
Port Richey, Florida 34668**

ARTICLE V - ADMISSION OF ADDITIONAL MEMBERS

The right, if given, of the members to admit additional members and the terms and conditions of the admissions shall be: **Additional members may be admitted only as unanimously agreed upon by the Members as set forth in the Operating Agreement.**

ARTICLE VI - MEMBERS RIGHTS TO CONTINUE BUSINESS

The right, if given, of the remaining members of the limited liability company to continue the business on the death, retirement, resignation, expulsion, bankruptcy, or dissolution of a member or the occurrence of any other event which terminates the continued membership of a member in the limited liability company shall be: **Only with the consent of all the remaining Members.**

IN WITNESS WHEREOF, these Articles of Organization have been signed, as Managing Members, by: **George P. Maniates and Marian F. Maniates.**

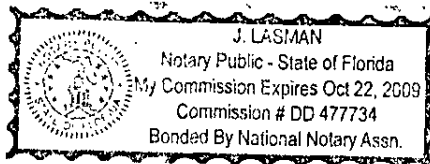
Dated this 31st day of August, 2009

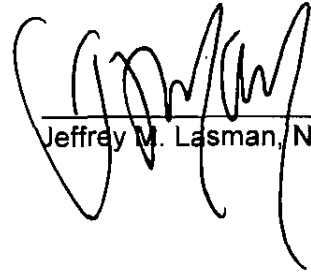

**George P. Maniates
Managing Member**


**Marian F. Maniates
Managing Member**

STATE OF FLORIDA
COUNTY OF HILLSBOROUGH

The foregoing instrument was acknowledged before me this 31st day of August, 2009, by **George P. Maniates** and **Marian F. Maniates**, who have produced Florida Driver Licenses as identification.





Jeffrey M. Lasman, Notary Public

**CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the limited liability company is: GMRM, LLC
2. The name and address of the registered agent and office is:

**Jeffrey M. Lasman, Esquire
LASMAN LAW FIRM, P.A.
6152 Delancey Station Street, Suite 205
Riverview, Florida 33578**

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.



Jeffrey M. Lasman

August 31, 2009
(Date)