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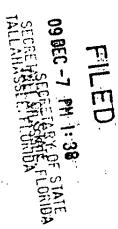


S. HAWKES
DEC - 8 2009
EXAMINER



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S. HAWKES

NUN A 2009

EXAMINER

4009-51856



FLORIDA DEPARTMENT OF STATE Division of Corporations

November 25, 2009

TONY VALDES 2550 NW 72 AVE SUITE 111 MIAMI, FL 33122-1345

SUBJECT: GC CONSTRUCTION LLC

Ref. Number: W09000051856

We have received your document for GC CONSTRUCTION LLC and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

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.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

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) 245-6955.

Suzanne Hawkes Regulatory Specialist II

Division of Corporations - P.O. BOX 6327 -Tallahassee, Florida 32314

Letter Number: 609A00036535

COVER LETTER

TO:	Registration Section Division of Corpo					
SUBJE	CCT:	GC DEVE	LOPN	MENT	GROUP	LLC
		Name of Limit	ted Liab	ility Com	pany	
The end	closed Articles of Or	ganization and fee(s) are	submitt	ed for fili	ng.	
Please r	return all correspond	ence concerning this mat	ter to th	e followii	ng:	
-		Ţ		/ALDE	S	
_		TONY		DES CF ompany	PA PA	
-		2550 NW 7		Inue S	SUITE 111	····
			7100	11033		
_	<u></u>	TET 14 5.4.		33122-		
		Cit	ly/State a	nd Zip Co	de	
_		i-mail address: (to be used	for future	annual re	port notificatio	n)
For furt	her information con	cerning this matter, pleas	e call:			
	TONY V		at (305)	640-0494
	Name of Po	erson		Area Co	de & Daytime	Telephone Number
Enclose	ed is a check for th	e following amount:				
] \$125.0		\$130.00 Filing Fee & Certificate of Status	Ce	rtified C	ing Fee & opy is enclosed)	\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	R D P	lailing Address egistration Section division of Corporations O. Box 6327 allahassee, FL 32314		Registra Division Clifton 2661 Ex	Courier Addration Section of Corporat Building secutive Centessee, FL 3236	ions er Circle

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:	120. 6		
The name of the Limited Lia	ability Company is:		TAS O
GC D	EVELOPMEN	T GROUP LLC	
(Must end with	the words "Limited Liabi	lity Company," "L.L.C.," or "LLC.")	SSE -7
ARTICLE II - Address:			
The mailing address and stre	eet address of the pi	rincipal office of the Limited I	iability Company is.
Principal Office Address:		Mailing Address:	RIDA
3651 NW 79 AVENUE		3651 NW 79 AVENUE	
MIAMI, FL 33166		MIAMI, FL 33166	
business entity with an active Florida The name and the Florida str	a registration.)	registered agent are:	vidual of another
	RICARDO (CAJIGAS	
	Name		
	3651 NW 79	AVENUE	
Flor	ida street address (P.O.	Box NOT acceptable)	
MIA	AMI, FL 33166	FL	
	City, State, a	nd Zip	
liability company at the p registered agent and agree t statutes relating to the proj	place designated in t to act in this capacit per and complete pe	accept service of process for the this certificate, I hereby accept to y. I further agree to comply with erformance of my duties, and I c stered agent as provided for in	the appointment as th the provisions of all am familiar with and
	\mathcal{W}		
Reg	gistered Agent's Signat	ture (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" = Manag			
"MGRM" = Mai	aging Member		74 SE
MGR		RICARDO CAJIGAS	温
- MOIX		3651 NW 79 AVENUE	
		MIAML FL 33166	وکون ک
		IVIIAIVII, FL 33 100	no 3
MGRM		CESAR CAJIGAS	OF STATE
		3651 NW 79 AVENUE	97 0
		MIAMI, FL 33166	5m
			
MGRM		MARTIN DEL BARRIO	
		3651 NW 79 AVENUE	·
		MIAMI, FL 33166	
			•
	_		
(No ottookussui	:(Curronne)		
(Use attachment	• /		
LE V: Effective	date, if other than th	e date of filing:	(OPTIONAL)
LE V: Effective	date, if other than th		(OPTIONAL)
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LE V: Effective ffective date is lis days after the d	date, if other than the ted, the date must late of filing.) GNATURE: Signature of a member of this document contract that the facts stated here.	be specific and cannot be more than per or an authorized representative of a mection 608.408(3), Florida Statutes, the exection statutes an affirmation under the penalties of erein are true.)	. (OPTIONAL) five business days pr ember.

Page 2 of 2

\$ 30.00 Certified Copy (Optional)\$ 5.00 Certificate of Status (Optional)