1000020285

(Re	equestor's Name)	 		
(Ad	ldress)			
(Ad	ldress)			
(Cit	ty/State/Zip/Phon	e #)		
PICK-UP	☐ WAIT	MAIL		
(Bu	siness Entity Nar	me)		
(Document Number)				
Certified Copies	Certificates	s of Status		
Special Instructions to Filing Officer:				
		:		

Office Use Only

G. MCLEOD

FEB 23 2010

EXAMINER



300167245583

02/22/10--01062--005 **125.00

10 FEB 22 PH 12: 25

SECRETARY OF STATE DIVISION OF COMPORATION

TRANSMITTAL LETTER

	istration Section sion of Corporations
SUBJECT:	GORDON MARKETING INTERNATIONAL L L C
	(Name of Limited Liability Company)
The enclosed	Articles of Organization and fee(s) are submitted for filing.
	Please return all correspondence concerning this matter to the following:
	MITCHELL GORDON
	(Name of Person)
	GORDON MARKETING INTERNATIONAL L L C (Firm/Company)
	P.O. Box 940721
	(Address)
	Maitland, Fl, 32794
	(City/State and Zip Code)
For further is	formation concerning this matter, please call:
	Mitchell Gordon at (407) 963-6105 (Name of Person) (Area Code & Davigne Telephone Number)
	(Name of Person) (Area Code & Daytime Telephone Number)

STREET ADDRESS:

TO:

Registration Section Division of Corporations 409 E. Gaines Street Tallahassee, Florida 32399 MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

Principal Office	Address:		Mailing Address:
1756 Clema	tis Ln.		P.O. Box 940721
Winter Par	k, Fl. 32792		Maitland, Fl. 32794
			Office, & Registered Agent's Signatus
	Florida street addre	ess of the re	gistered agent are:
	Florida street addre		gistered agent are:
	Florida street addre	ess of the re	gistered agent are:
	Florida street address Mits 1756 Clema	chell Go Name	gistered agent are: Ordon Winter Park, Fl. 32792 Box NOT acceptable)
	Florida street address Mite 1756 Clema Florida street Winter	chell Go Name atis Ln.	gistered agent are: Ordon Winter Park, Fl. 32792 Box NOT acceptable) FLORIDA 32792

Page 1 of 2 (CONTINUED)

ARTICLE IV- Manager(s) or Managing Member(s):
The name and address of each Manager or Managing Member is as follows:

<u>Title:</u> "MGR" = Manager	Name and Address:		
"MGRM" = Managing Member			
MGRM	Mitchell Gordon		
	1756 Clematis Ln.		
	Winter Park, Fl. 32792		
·			
(Use attachment if necessary)			
NOTE: An additional article must	be added if an effective date is requested.		
The rest of the re	or added if an officerive date is requested.		
REQUIRED SIGNATURE:	,		
1	wteder Carel		
Signature of a member or a	n authorized regresentative of a member.		
	· ·		
of this document constitutes a	(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.)		
Michell Go	*		
Typed or	printed name of signee		

Filing Fees:

\$100.00 Filing Fee for Articles of Organization
\$ 25.00 Designation of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)