

L10000071701

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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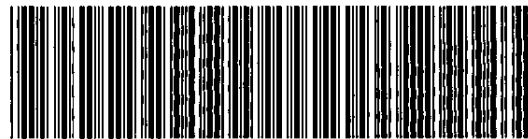
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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FILED  
10 JUL -6 PM 3:16  
CLERK OF COURT  
JANUARY 10 2010

S. HAWKES  
JUL 7 2010  
EXAMINER



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250 N. Westlake Blvd. | Suite 240 | Westlake Village, CA 91362

June 28, 2010

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

RE: Gordon Anderson Investments, LLC

To whom it may concern:

The Enclosed Articles of Organization and Fee(s) are submitted for filing.  
Also, please find enclosed a check for state filing fees in the amount of **\$155.00**  
made payable to the FL Dept of State. For information to this filing at the  
undersigned.

Thank you in advance and please return all correspondence in regards to this filing  
using the pre addresses stamped envelope included.

Sincerely,

**Amanda J. Beren, Document Processor**  
CorpNet™, Incorporated  
888-449-2638 Ext. 105  
aberen@corpnet.com

Toll-Free: 888-449-2638  
Direct/Int'l: 805-449-2638  
Fax: 805-449-2639 | info@corpnet.com

**ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY**

**ARTICLE I - Name:**

The name of the Limited Liability Company is:

Gordon Anderson Investments, LLC

(Must end with the words "Limited Liability Company," "L.L.C.," or "LLC.")

**ARTICLE II - Address:**

The mailing address and street address of the principal office of the Limited Liability Company is:

**Principal Office Address:**

177 US Highway 1, #144  
Tequesta, FL 33469

**Mailing Address:**

177 US Highway 1, #144  
Tequesta, FL 33469

**ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:**

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

The name and the Florida street address of the registered agent are:

Corporation Service Company

Name

1201 Hays Street

Florida street address (P.O. Box **NOT** acceptable)

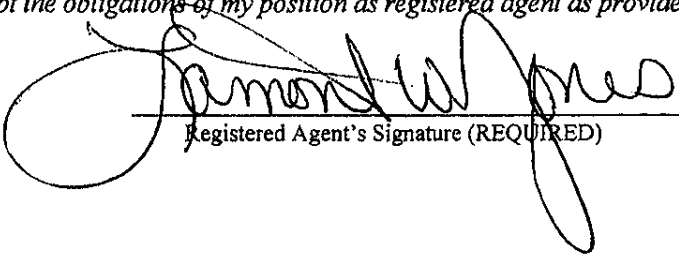
Tallahassee

FL

32301

City, State, and Zip

*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 as provided for in Chapter 608, F.S.*

  
Registered Agent's Signature (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" = Manager

"MGRM" = Managing Member

**Name and Address:**

MGRM

Robert Tyler Berg

177 US Highway 1, #144

Tequesta, FL 33469

\_\_\_\_\_

\_\_\_\_\_

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\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

(Use attachment if necessary)

**ARTICLE V:** Effective date, if other than the date of filing: \_\_\_\_\_ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

**REQUIRED SIGNATURE:**



Signature of a member or an authorized representative of a member.

(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.)

Amanda J. Beren, Organizer

Typed or printed name of signee

**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)**

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10 JUL -6 PM 3:16