4000073013

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	me)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only

EFFECTIVE DATE 8/1/10



800183095858

07/09/10--01023--026 **130.00



D. BRUCE
JUL 1 2 2010
EXAMINER

COVER LETTER

Registration Section Division of Corporations

SUBJECT: GATOR	R KICKS MELROSE LLO		
		ed Liability Company	
The enclosed Articles	of Organization and fee(s) are	submitted for filing.	
Please return all corres	pondence concerning this matt	ter to the following:	
GREENE MA	ARSHALL LABUZAN IV		
		Name of Person	
GATOR KICH	KS MELROSE LLC		
 		Firm/Company	
24950 SOUT	HWEST 144 AVENUE		
		Address	
MIAMI, FLOR			10 ·
CDEENE4DI		y/State and Zip Code	
GREENE4BU	JILDERS@BELLSOUTH. E-mail address: (to be used f	or future annual report notification)	
For further information	concerning this matter, please	call:	F.S.
GREENE MARSHA	ALL LABUZAN IV of Person	at (786) 556-6218 Area Code & Daytime Telep	phone Number A
Enclosed is a check f	or the following amount:		
□\$125.00 Filing Fee	□\$130.00 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 C Tallahassee, FL 32301	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

GATOR KICKS MELROSE LLO	Limited Liability Company, "L.L.C.," or "LLC.")	
(was one was no works	Elimet Elizability Company, Elizabet, of Elizabet,	
ARTICLE II - Address:		
The mailing address and street addre	ss of the principal office of the Limited Liability Company is:	
Principal Office Address:	Mailing Address:	
24950 SOUTHWEST 144 AVENUE	24950 SOUTHWEST 144 AVENUE	
MIAMI, FLORIDA 33032	MIAMI, FLORIDA 33032	
business entity with an active Florida registration	n.)	
The name and the Florida street addr	ess of the registered agent are:	ון בי
The name and the Florida street addr	ess of the registered agent are: SHALL LABUZAN IV Name	Ŋ
The name and the Florida street addr GREENE MARS	ess of the registered agent are:	7
The name and the Florida street addr GREENE MARS 24950 SOUTH	ess of the registered agent are: SHALL LABUZAN IV Name VEST 144 AVENUE ida street address (P.O. Box NOT acceptable)	7
The name and the Florida street addr GREENE MARS 24950 SOUTH	ess of the registered agent are: SHALL LABUZAN IV Name WEST 144 AVENUE	7
The name and the Florida street addr GREENE MARS 24950 SOUTH Florida	ess of the registered agent are: SHALL LABUZAN IV Name VEST 144 AVENUE ida street address (P.O. Box NOT acceptable)	

(CONTINUED)
Page 1 of 2

EFFECTIVE DATE 8/1/10

ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

"MGR" = Manager "MGRM" = Managing Member	Name and Address:
MGRM	GREENE MARSHALL LABUZAN IV
	24950 SOUTHWEST 144 AVENUE
	MIAMI, FLORIDA 33032
March William State of the Stat	
	a the second sec
(Use attachment if necessary)	
CLE V: Effective date, if other than the	e date of filing: August 1, 2010 . (OPTIONAL)
effective date is listed, the date must b	e date of filing: August 1, 2010 (OPTIONAL) De specific and cannot be more than five business days pri
effective date is listed, the date must b	
effective date is listed, the date must b	
effective date is listed, the date must b	e date of filing: August 1, 2010 (OPTIONAL) ce specific and cannot be more than five business days pri
effective date is listed, the date must be days after the date of filing.	
effective date is listed, the date must be days after the date of filing.	pe specific and cannot be more than five business days pri
effective date is listed, the date must be days after the date of filing. REQUIRED SIGNATURE:	be specific and cannot be more than five business days pri
effective date is listed, the date must be days after the date of filing. REQUIRED SIGNATURE: Signature of a memb	be specific and cannot be more than five business days pri
effective date is listed, the date must be days after the date of filing. REQUIRED SIGNATURE: Signature of a memb	er or ap authorized representative of a member. ection 608.408(3), Plorida Statutes, the execution titutes an affirmation under the penalties of perjury

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)