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Certified Copies	_ Certificates	of Status	

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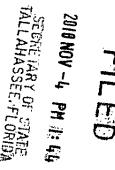
EXAMINER

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COVER LETTER

TO:	Registration Section Division of Corporations	
SUBJI	CCT: GCGPLLC Name of Limited Liability Company	
The en	closed Articles of Organization and fee(s) are submitted for filing.	
Please	return all correspondence concerning this matter to the following:	
	David York De Costa	
	Gold Coast Gold Parties	
	2420 Zeder Avenue	7010 HOV
	Address	
	Delray Beach FL 33444	-
-	City/State and Zip Code COD COMCAST. Net E-mail address: (to be used for future annual report notification)	
For fur	ther information concerning this matter, please call:	
I	Area Code & Daytime Telephone Number	
Enclos	ed is a check for the following amount:	
\$125.00	Filing Fee \$\simegatter{\sumsymbol{\sum}\sin\sin\sin\sin\sin\sin\sin\sin\sin\sin	s &
	Mailing Address Street/Courier Address Pagistration Section Pagistration Section	

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the Limited Liability Company is:				
GCGPLLC. (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: Mailing Address:				
2420 Zeder Avenue 2420 Zeder Ave Delray Beach, FL Delray Beach, FL 33444 33444				
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: Kimberly DeCosta Name Name				
2420 Zeder Avenue Florida street address (P.O. Box NOT acceptable) Tel col Beoch Fl. 33444				
Delray Beach FL 33444 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)

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

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

Title:	Name and Address:
"MGR" = Manager "MGRM" = Managing Member	
MGRM	David V. DeCosta 2420 Zeder Avenue DeTray Beach, FL 33444
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(Use attachment if necessary)	OF SINGLE CONTROL OF SINGLE CO
OTLOUE V. TOC. Plan date (C. d d d	late 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. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)

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)