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EFFECTIVE DATE 10-20-11

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EXAMINER

COVER LETTER

TO:

Registration Section

Division of Corporations
SUBJECT: Gagliano Holdings 3, LLC
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:
John Gagliano
Name of Person
Gagliano Holdings 3, LLC
Firm/Company
12791 Metro Parkway
Address
Fort Myers, FL 33966
City/State and Zip Code (5)
giopozegoniczoniaiori.com
E-mail address: (to be used for future annual report notification)
E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call:
Grace Lopez _{at (} 586) 493-1211
Name of Person Area Code & Daytime Telephone Number
Enclosed is a check for the following amount:
\$125.00 Filing Fee \$\sum \text{S130.00 Filing Fee & Certificate of Status}\$ Certificate of Status Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)
Mailing AddressStreet/Courier AddressRegistration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center Circle

Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

A	R1	ΓIC	LE	I -	Naı	me:
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The name of the Limited Liability Company is:

Gagliano Holdings 3, 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:Mailing Address:12971 Metro Parkway12971 Metro ParkwayFort Myers, FL 33966Fort Myers, FL 33966

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

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:

or rorran street address	or the registered agent are.	$\mathbb{F}_{\mathcal{O}}$		
John Gagliano		F.5		
Name			10(7
12971 Metro Parkway		500 F	<u>~</u>	artistantiques T Mauson artis
Florida street address (P.O. Box NOT acceptable)		įπ.	777	" + ‡
Fort Myers	_{FL} 33966	FIG		براهدر د فوجهدان
City, State, and Zip		20 A	0	
		7>		

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:

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:		
MGR	John Gagliano		
	1993 8th Street South Naples, FL 34102		
MGR	Grace Lopez		
	18301 Nardy		
	Clinton Township, MI 48036		
MGR	Robert Gagliano	<u></u> ;	
	48390 Harbor Drive	三	
	Chesterfield, MI 48047	<u>></u> 8	21272
MGR	Richard Gagliano		in the same of the
	14945 Cranbrook		7.713 1. 3
	Utica, MI 48315	Harry Control	, 15 Mp
(Use attachment if necessary)		FO I	
LE V: Effective date, if other than the		. (OPTIONAL)	•

ARTICLE V: Effective date, if other than the date of filing: 10-20-2011 (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. 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.)

John Gagliano

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)