(Re	equestor's Name)
(Ac	ddress)
(Ad	ddress)
(Ci	ity/State/Zip/Phone #)
<b>—</b>	· ·
☐ PICK-UP	WAIT MAIL
(Bu	usiness Entity Name)
•	
(Do	ocument Number)
,	
Certified Copies	Certificates of Status
Special Instructions to	Filing Officer:
,	•
	<b>A</b>

A. LUNT

MAY 30 2011

**EXAMINER** 

Office Use Only



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## **COVER LETTER**

TO: Registration Division of C	Section Corporations		
<sub>SUBJECT:</sub> Gato	r Cable, LLC		
		ed Liability Company	
The enclosed Articles	of Organization and fee(s) are	submitted for filing.	
Please return all corre	spondence concerning this matt	er to the following:	
<u>Cesar W</u>	Vong		
		Name of Person	
Gator Ca	able, LLC		Dolg.
		Firm/Company	170
22917 S	W 56th Ave.		ECURLIANAS 2
		Address	ON COMMENT
Boca Rate	on, FL 33433		mo <b>T</b>
	City	/State and Zip Code	<u> </u>
cesar@ga	torcable.com		
	E-mail address: (to be used for	or future annual report notification)	
For further information	n concerning this matter, please	call:	
Cesar Wong		at (561 ) 271-8438	
Name	c of Person	Area Code & Daytime Telepho	ne Number
Enclosed is a check to	for 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 Circl Tallahassee, FL 32301	le

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

Α	RT	TCI	$\mathbf{R}^{-1}$	T _ T	Name:

The name of the Limited Liability Company is:

Gator Cable, 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:	
22917 SW 56th Ave.	22917 SW 56th Ave.	
Boca Raton, FL 33433	Boca Raton, FL 33433	_
		_

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:

Cesar Wong	
	Name
22917 SW 561	th Ave.
Florida stre	eet address (P.O. Box NOT acceptable)
Boca Raton	<sub>FL</sub> 33433
С	ity, 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)

<u> Fitle:</u>	Name and Address:
"MGR" = Manager	2
"MGRM" = Managing Member	755 C
Chief Operations Officer	Cesar Wong
	22917 SW 56th Ave.
	Boca Raton, FL 33433
Chief Creative Officer	Raul San Andres
· · · · · · · · · · · · · · · · · · ·	355 Ipswich St.
	Boca Raton, FL 33487
<del></del>	
•	
(Use attachment if necessary)	· .
• ,	the date of filing: 6/1/2012 . (OPTIONAL
LE V: Effective date, if other than fective date is listed, the date mus	the date of filing: 6/1/2012 . (OPTIONAL) to be specific and cannot be more than five business days.
LE V: Effective date, if other than	
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LE V: Effective date, if other than fective date is listed, the date mus	
LE V: Effective date, if other than a fective date is listed, the date mus days after the date of filing.)	
LE V: Effective date, if other than a fective date is listed, the date mus days after the date of filing.)	
LE V: Effective date, if other than a fective date is listed, the date mus days after the date of filing.)  REQUIRED SIGNATURE:	
LE V: Effective date, if other than a fective date is listed, the date mus days after the date of filing.)  REQUIRED SIGNATURE:	t be specific and cannot be more than five business days

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)