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2012 JUN 28 AM II: 01
SECRETARY OF STATE
ANA SSEE, FLORIDA

W12-31821

J. BRYAN

JUN 29 2012

EXAMINER

COVER LETTER

Registration Section

TO:

Division of Corporations
SUBJECT: GALLERY PARTNERS, 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:
PAUL WINKLE
Name of Person
GALLERY PARTNERS, LLC
Firm/Company
9013 BAYWOOD PARK DRIVE Address SEMINOLE, FL 33777 City/State and Zip Code pwinkle@tampabay.rr.com E-mail address: (to be used for future annual report notification)
Address
SEMINOLE, FL 33777 City/State and Zin Code
City/State and Zip Code pwinkle@tampabay.rr.com
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
PAUL WINKLE at 727 639-0951 Name of Person Area Code & Daytime Telephone Number
Name of Ferson Area Code & Daytime Felephone Number
Enclosed is a check for the following amount:
\$125.00 Filing Fee \$\ \text{S130.00 Filing Fee & Certificate of Status} \text{Certified Copy (additional copy is enclosed)} \text{S160.00 Filing Fee, Certified Copy (additional copy is enclosed)} \text{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



June 12, 2012

PAUL WINKLE 9013 BAYWOOD PARK DRIVE SEMINOLE, FL 33777

SUBJECT: GALLERY PARTNERS, LLC

Ref. Number: W12000031821



We have received your document for GALLERY PARTNERS, LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We don't file the operating agreement you need to keep for your records.,

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Joey Bryan Regulatory Specialist II

Letter Number: 112A00016474

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY TEN MILES

ARTICLE I - Name:

The name of the Limited Liability Company is:

GALLERY PARTNERS, 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:
9013 BAYWOOD PARK DRIVE	9013 BAYWOOD PARK DRIVE
SEMINOLE, FL 33777	SEMINOLE, FL 33777

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:

PAUL WINKLE	
Name	_
9013 BAYWOOD PARK DRIVE	=

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

SEMINOLE 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:

MGRM	PAUL WINKLE
	9013 BAYWOOD PARK DRIVE SEMINOLE, FL 33777
	SEMINOLE, FL 33717
MGRM	PAUL WINKLE 9013 BAYWOOD PARK DRIVE SEMINOLE, FL 33777 FRANK PINIZZOTTO 81 16TH STREET SOUTH
	81 16TH STREET SOUTH
	ST. PETERSBURG, FL 33705
	
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(Use attachment if necessary)	
(Osc attachment if necessary)	
LE V: Effective date, if other than	n the date of filing: (OPTIONAL)
fective date is listed, the date mu	ist be specific and cannot be more than five business days [
days after the date of filing.)	
DECLUBED CICNATURE.	
REQUIRED SIGNATURE:	

(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.)

PAUL WINKLE

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)