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(850) 245-6051.

COVER LETTER

TO: Registration Section **Division of Corporations** Antonia Gibson, 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: Antonia Gibson Name of Person Firm/Company 3100 N. Ocean Boulevard, Apt. 1105 Fort Lauderdale, Florida 33308 City/State and Zip Code agib@att.net E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Antonia Gibson Area Code & Daytime Telephone Number Name of Person

Enclosed is a check for the following amount:

■\$125.00 Filing Fee □\$130.00 Filing Fee &

Certificate of Status

□\$155.00 Filing Fee & 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 Circle Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name

The name of the Limited Liability Company is:

ANTONIA GIBSON, LLC

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TALLAHASSEF, FI ORIDA

ARTICLE II - Address

The mailing address and street address of the principal office of the Limited Liability Company is:

3100 N Ocean Boulevard, Apt. 1105, Ft. Lauderdale, Florida 33308

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature

The name and the Florida street address of the registered agent are:

Antonia Gibson, 3100 N Ocean Boulevard, Apt. 1105, Ft. Lauderdale, Florida 33308

Having been named as a 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)

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

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

Antonia Gibson-Manager

3100 N Ocean Boulevard, Apt. 1105,

Ft. Lauderdale, Florida 33308

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.)

Antonia Gibson

Typed or printed name of Signee