# Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850) 617-6383

Prom:

: C T CORPORATION SYSTEM Account Name

Account Number : FCA000000023

: (850)222-1092

Phone Fax Number

: (850)878-5368

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. \*\*

Bma11	Address:	
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# FLORIDA LIMITED LIABILITY CO.

Gulag, LLC

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$125.00

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Corporate Filing Menu

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(850) 245-6051.

### **COVER LETTER**

TO:	Registration Division of C		
SUBJE	Gula <u>a,</u> L CT:	ıc	
	ted Liability Company		
The encl	losed Articles	of Organization and fee(a) are	submitted for filing.
Picase re	sium all corres	pondence concerning this mat	ter to the following:
	L. Michael Lec	, Esq.	
~		······································	Name of Person
J	ones Day		
~			Firm/Company
1	420 Peachtree	Street N.B., Suite 800	
~			Address
ı	Atlanta, GA 30	309	
-			ny/Susta and Zip Code
a.	kce@jonesday.		for future annual report notification)
For first	on information	concerning this matter, please	·
ror iuita	er moinendi	concerning this matter, pieas	
A. Michael Lee, Esq.			404 581-8428 at ()
	Namo	of Person	Ares Code & Daytime Telephone Number
Enclose	d is a check f	or the following amount:	
<b>3</b> \$1,25.00	O Filing Fee	□\$130.00 Filing Fee & Certificate of Status	Certified Copy (additional copy is enclosed)  \$160.00 Filing Pec, Certificate of Status & Certified Copy (additional copy is enclosed)
		Malling Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Sixeet/Courier Address Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassoo, FL 32301

#### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:				
The name of the Limited Liability Company is:				
Guing, LLC (Must end with the words "Limited Liability	y Company, "L.L.C.," or "LLC.")			
· · · · · · · · · · · · · · · · · · ·	noipal office of the Limited Liability Company is:			
Principal Office Address:	Mailing Address:			
240 1st Avenue S	240 1st Avenue 8			
St. Petersburg, Florida 33701	St. Petersburg, Florida 33701			
business entity with an active Florida registration.)  The name and the Florida street address of the re  C T Corporatio  Name				
1200 South Pine				
	rese (P.O. Box <u>NOT</u> acceptable)			
Plantation City, Sta	FL 33324 te, 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  CT Corporation System  By: Connect Property Agent's Signature (REQUIRED)				
(CONTINU	JED)			
Page 1 of 2	SECR ALLA			

3 JUL 26 AM II: 05

# 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	R, Patrick Marston
	240 1st Avenue S
	St. Petersburg, Florida 33701
<del></del>	
	——————————————————————————————————————
(Use attachment if necessary)  ARTICLE V: Effective date, if other than (If an effective date is listed, the date may prior to or 90 days after the date of filing	oust be specific and cannot be more than five business days
REQUIRED SIGNATURE:	
Signature of a men	mber or an authorized representative of a member.
constitutes an affirmation w I am aware that any false in	608.408(3), Florida Statutes, the execution of this document order the penalties of perjury that the facts stated herein are true. formation submitted in a document to the Department of State lony as provided for in s.817.155, F.S.)
R. Patrick Marston	
	Typed or printed name of signee
Filing Roses	

Filing Feet:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)

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