

L13000112678

**Florida Department of State
Division of Corporations
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To:

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From:

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Phone : (305) 599-0839
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AUG - 9 2013

L. SELLERS

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****
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**FLORIDA LIMITED LIABILITY CO.
GDAL, LLC.**

Certificate of Status	0
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Help

GDAL, LLC.

(NAME OF ORGANIZATION IN FULL)

THE UNDERSIGNED SUBSCRIBERS TO THESE ARTICLES OF ORGANIZATION, EACH A NATURAL PERSON COMPETENT, HEREBY ASSOCIATE THEMSELVES TOGETHER TO FORM A LIMITED LIABILITY COMPANY UNDER THE LAWS OF THE STATE OF FLORIDA.

ARTICLE I

THE NAME OF THE ORGANIZATION IS:

GDAL, LLC.

ARTICLE II

THE GENERAL NATURE OF THE BUSINESS TO BE TRANSACTED BY THIS ORGANIZATION IS AS FOLLOWS: TO CONDUCT BUSINESS IN THE INDUSTRY MARKETING AND SALES CONSULTING AND ANY OTHER BUSINESS IN THE STATE OF FLORIDA AND OTHER STATES AND COUNTRIES THAT THE BOARD MAY APPROVE FROM TIME TO TIME.

PREPARED BY: TURNER-MCGOWAN & ASSOCIATES LLC.
1100 S STATE ROAD 7, STE 200A
MARGATE, FL 33068
954) 970-0006

ARTICLE III

THE INITIAL POST OFFICE ADDRESS OF THIS ORGANIZATION IS
505 VINCINOLA CREST WAY
TAMPA, FL 33619

HILLSBOROUGH COUNTY OF FLORIDA. THE MEMBERS, FROM TIME TO TIME,
MAY MOVE THE PRINCIPLE OFFICE TO ANY OTHER ADDRESS IN FLORIDA.

ARTICLE IV

CERTIFICATE DESIGNATING PLACE OF DOMICILE OR BUSINESS OF SERVICE OF
PROCESS IN THE STATE OF FLORIDA AND DESIGNATION OF RESIDENT AGENT
FOR SERVICE OF PROCESS.

IN PURSUANCE OF F.S. 48.091, THE FOLLOWING IS SUBMITTED IN
COMPLIANCE WITH SAID ACT:

THAT DESIRING TO ORGANIZE UNDER THE LAWS OF THE STATE OF FLORIDA
WITH THE FOLLOWING PERSON DESIGNATED AS AGENT TO ACCEPT SERVICE OF
PROCESS. OTEL TURNER: 1100 S STATE ROAD 7, STE 200A, MARGATE, FL
33068.

ACKNOWLEDGMENT

HAVING BEEN NAMED BY THE ABOVE Ull TO ACCEPT SERVICE OF
PROCESS DESIGNATED IN THE ABOVE CERTIFICATE, I HEREBY AGREE TO ACT
IN SAID CAPACITY AND TO COMPLY WITH THE PROVISIONS OF KEEPING SAID
OFFICE OPEN.

BY: 

ARTICLE V

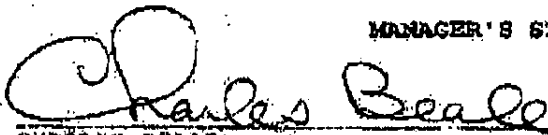
THE NAMES AND POST OFFICE ADDRESSES OF THE MANAGER OF ORGANIZATION

CHARLIE BEALE

505 VINCINOLA CREST WAY

TAMPA, FL 33619

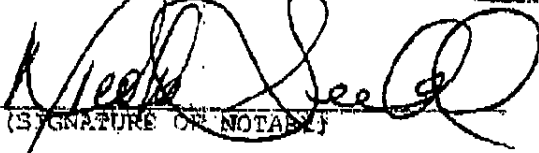
MANAGER'S SIGNATURES


CHARLIE BEALE

STATE OF FLORIDA)
COUNTY OF BROWARD) SS

BEFORE ME, THE UNDERSIGNED AUTHORITY, DULY AUTHORIZED TO TAKE OATHS
AND RECEIVE ACKNOWLEDGMENTS, PERSONALLY APPEARED CHARLIE BEALE
BEFORE ME THE PERSON(S) DESCRIBED AS SUBSCRIBER(S) IN THE WHO
EXECUTED THE FOREGOING ARTICLES OF INCORPORATION.

WITNESS MY HAND AND SEAL THIS 8 DAY OF August, 2013.


(SIGNATURE OF NOTARY)

NOTARY PUBLIC, STATE OF FLORIDA

(SEAL)



NICOLE C SEAL
MY COMMISSION # EE 125863
EXPIRES: August 28, 2015
Bonded Third Degree Notary Service

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TALLAHASSEE, FLORIDA

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