

Division of Corporations

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**L1300016284**

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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**To:**  
Division of Corporations  
Fax Number : (850) 617-6383

**From:**  
Account Name : C T CORPORATION SYSTEM  
Account Number : FCA000000023  
Phone : (850) 222-1092  
Fax Number : (850) 878-5368

2013 AUG 16 AM 10:45  
STATE  
TALLAHASSEE, FLORIDA

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

**Email Address:** \_\_\_\_\_

**FLORIDA LIMITED LIABILITY CO.  
GDC Wilson, LLC**

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

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TALLAHASSEE, FLORIDA

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J. SAULSBERRY  
EXAMINER  
AUG 19 2013

### COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** GDC Wilson, 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:

Nina Cianciolo

Name of Person

Gatlin Development Co., Inc.

Firm/Company

888 E. Las Olas Blvd., Suite 800

Address

Fort Lauderdale, FL 33301

City/State and Zip Code

nina@gatlindc.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Nina Cianciolo

Name of Person

at ( 954 ) 302-5800

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

- |  |   |   |   |
|--|---|---|---|
| <input type="checkbox"/> \$125.00 Filing Fee | <input type="checkbox"/> \$130.00 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$155.00 Filing Fee &<br>Certified Copy<br>(additional copy is enclosed) | <input type="checkbox"/> \$160.00 Filing Fee,<br>Certificate of Status &<br>Certified Copy<br>(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:

GDC Wilson, 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:

888 East Las Olas Boulevard, Suite 600  
Fort Lauderdale, FL 33301

#### Mailing Address:

888 East Las Olas Boulevard, Suite 600  
Fort Lauderdale, FL 33301

### 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:

NRAI Services, Inc.

Name

515 East Park Avenue

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

Tallahassee

FL 32301

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.*

NRAI Services, Inc.

By: 

Registered Agent's Signature (REQUIRED)

Sean Emerick, Asst. Secretary

(CONTINUED)

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JUDICIAL CIRCUIT IN AND FOR  
FLORIDA  
NINTH JUDICIAL CIRCUIT  
FORT LAUDERDALE, FLORIDA

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

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

**Title:**

"MGR" = Manager

"MGRM" = Managing Member

**Name and Address:**

MGRM

Gatlin Partners 3, LLC

888 Las Olas Boulevard, Suite 600

Fort Lauderdale, FL 33301

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

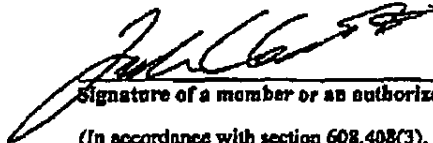
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\_\_\_\_\_

(Use attachment if necessary)

**ARTICLE V: Effective date, if other than the date of filing: \_\_\_\_\_ (OPTIONAL)**  
(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

**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.)

Franklin C. Gatlin, III

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)**