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2019 SEP 12 MM (D: 47 SECRETARY OF STATE

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COVER LETTER

TO: **Registration Section Division of Corporations**

G-Force Dance, 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:

Karen Martina Name of Person	
Firm/Company	 .
1455 Argyle Drive	SECO TAL-ITY
Address	
Fort Myers, FL 33919	ARY SSEE
City/State and Zip Code	
markmartina@yahoo.com	
E-mail address: (to be used for future annual report notification)	15 AND 15

For fu

Karen Martina

Name of Person

Area Code & Daytime Telephone Number

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:

G-Force Dance, LLC		
(Must end with	the words "Limited Liability Company, "L.L.C.," or "LLC.")	
ARTICLE II - Address:		
The mailing address and stre	eet address of the principal office of the Limited	Liability Company is:
Principal Office Address:	Mailing Address:	
1455 Argyle Drive	1455 Argyle Drive	
Fort Myers, FL 33919		
ADTICLE HIL D.	Fort Myers, FL 33919 I Agent, Registered Office, & Registered Agent Serve as its own Registered Agent You must designate an in	nt's Signature:
ARTICLE III - Registered (The Limited Liability Company cannot business entity with an active Florid	I Agent, Registered Office, & Registered Agenot serve as its own Registered Agent. You must designate an in	ndividual or another is a contract of the cont
ARTICLE III - Registered (The Limited Liability Company cannot business entity with an active Florid	Agent, Registered Office, & Registered Agenot serve as its own Registered Agent. You must designate an in la registration.) reet address of the registered agent are:	ndividual of Archer 18 SEP 12
ARTICLE III - Registered (The Limited Liability Company can business entity with an active Florid The name and the Florida st	Agent, Registered Office, & Registered Agenot serve as its own Registered Agent. You must designate an in la registration.) reet address of the registered agent are:	ndividual of Archer 18 SEP 12
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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)

Page 1 of 2

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

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

	1 " = Managi	ng Member	
MGR			Karen Martina
			1455 Argyle Drive
			Fort Myers, FL 33919
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CLE V: E effective o or 90 da	Effective date date is lister ays after the RED SIGN	e, if other than d, the date me date of filing	ust be specific and cannot be more than five bus

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)