Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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Division of Corporations

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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. G & N GROUP, LLC

Certificate of Status	1
Certified Copy	0
Page Count	03
Estimated Charge	\$130.00

1. SHAVETS OCT 1 1 2013

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICL	ΕI	- Na	me:
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. The name of the Limited Liability Company is:

G & N GROUP, LLC

(Must end with the wor	rds "Limited Liability Company, "L.L.C.," or "LLC.")	· <u>-</u>
ARTICLE II - Address: The mailing address and street ad	dress of the principal office of the Limited L	iability Company is:
Principal Office Address:	Mailing Address:	
10775 S.W. 31 Street Miami, Florid a33165	10775 S.W. 31 Street Mlami, Florida 33165	
ARTICLE III - Registered Ages The Limited Liability Company cannot serv business entity with an active Florida regist	nt, Registered Office, & Registered Agent ve as its own Registered Agent. You must designate an inditration.)	's Signature: vidual or another
The name and the Florida street a	ddress of the registered agent are:	
Maria Ferra	er	
****	Name	7 5 F
10775 S	.W. 31 Street	And the same
	Florida street address (P.O. Box NOT acceptable)	
Mlami	3316E	

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..

City, State, and Zip

Registered Agent's Signature (REQUIRED)

(CONTINUED)

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<u>Title:</u> "MGR" = Manager "MGRM" = Managing Me	Name and Address:	
Manager	Maria Ferrer 10775 S.W. 31 Street	
	Mlami, Florida 33165	
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	·	
		
(Use attachment if necessar	ry)	
	ner than the date of filing: (OPTIONAL) ate must be specific and cannot be more than five business days prog.)	rior
	A Part -	
REQUIRED SIGNATUR	Œ: 55 g	
MTO.	ua herus	Į.
and but the	of a member or an authorized representative of a member.	#0:
- \	The state of the s	
(In accordance whit constitutes an affin I am aware that an	th section 608.408(3), Florida Statutes, the execution of this document, mation under the penalties of perjury that the facts stated herein are true, y false information submitted in a document to the Department of State degree felony as provided for in s.817.155, F.S.)	

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

Filing Fees: