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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Gelcorp Industries, 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:

Jeffrey B. Gelman
Name of Person
Gelcorp Realty, LLC
Firm/Company
9508 Windy Ridge Rd.
Address
Windermere, FL 34786-8311
City/State and Zip Code
gelcorpmgmt@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Patti Hatcher	772 <u>546-4197</u>		
Name of Person	Area Code & Daytime Telephone Number		

Enclosed is a check for the following amount:

■\$125.00 Filing Fee U\$130.00 Filing Fee & Certificate of Status Certified Copy (additional copy is enclosed)

□ \$160.00 Filing Fee, 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: The name of the Limite	d Liability Compa	any is:			
Gelcorp Industries, LLC		The Company of the Co		_	
(Must end	with the words "Limite	ed Liability Company, "L.L.C.," or "LLC.")			
ARTICLE II - Addres	s:				
The mailing address and	d street address of	the principal office of the Limited I	iability C	Comp	oany is:
Principal Office Addr	ess:	Mailing Address:			
9508 Windy Ridge Rd		9508 Windy Ridge Rd.			
Windermere, FL 34786-8311		Windermere, FL 34786-8311		- -	
		-		~	
business entity with an active The name and the Florid Jeffre	Florida registration.) da street address o	n Registered Agent. You must designate an indi f the registered agent are: Name	vidual or an ALLANDA SEET TEE	3 DEC 19 AM	FILED
9508	Windy Ridge Rd.	reet address (P.O. Box NOT acceptable)	喜高	II: 2	
\\/in	dermere	34786-8311	,:	တိ	
		FL 34700-0311 City, State, and Zip			
liability company at registered agent and a all statutes relating to	registered agent a the place designat gree to act in this the proper and co ions of my position	end to accept service of process for the ed in this certificate, I hereby accept capacity. I further agree to comply complete performance of my duties, and as registered agent as provided for as Signature (REQUIRED)	the appo with the p nd I am fa	intme rovis milia	ent as ions of er with
	riogistered 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:

"MGRM" = Managing Member	er
MGR	Jeffrey B. Gelman
	9508 Windy Ridge Rd
	Windermere, FL 34786
	<u> </u>
	<u> </u>
	2 6
(Use attachment if necessary)	
CLE V: Effective date if other	than the date of filing: (OPTIONAL)
	te must be specific and cannot be more than five business of
effective date is listed, the da	te must be specific and cannot be more than live business t
	•
	•
	īling.)
to or 90 days after the date of f	īling.)

Jeffrey B. Gelman

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)

constitutes a third degree felony as provided for in s.817.155, F.S.)