# 14000004483

(Req	uestor's Name)	
(Add	ress)	
(Add	ress)	•
(City/	/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
(Busi	iness Entity Nan	ne)
(Doc	ument Number)	
Certified Copies	Certificates	of Status
Special Instructions to Fi	iling Officer	
	milg officer.	

Office Use Only



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### FLORIDA DEPARTMENT OF STATE Division of Corporations

October 21, 2013

AYMEN KENAWY 3890 JENKS AVENUE LYNN HAVEN, FL 32444

SUBJECT: GYRO KING PCB LLC Ref. Number: W13000058217

We have received your document for GYRO KING PCB LLC and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name must contain a word that will clearly indicate that it is a corporation. Such words include: CORPORATION, CORP., COMPANY, CO., INC., and INCORPORATED.

The document must state the number of shares of authorized stock. The consultation of a legal counsel is always recommended if uncertain of the appropriate number of shares to authorize.

Section 607.0120(6)(b), or 617.0120(6)(b), Florida Statutes, requires that articles of incorporation be executed by an incorporator.

If your business entity does not intend to transact business until January 1st of the upcoming calendar year, you may wish to revise your document to include an effective date of January 1st. If you do not list an effective date of January 1st, your business entity will become effective this calendar year and it will be required to file an annual report and pay the required annual report fee for the upcoming calendar year this coming January, which is merely weeks away. By listing an effective date of January 1st, the entity's existence will not begin until January 1st of the upcoming year and will, therefore, postpone the entity's requirement to file an annual report and pay the required annual report filing fee until the following calendar year.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Claretha Golden Regulatory Specialist II

Letter Number: 013A00024535

Effective date 1/14

New Filing Section

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www.sunbiz.org

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# **COVER LETTER**

TO: Registration Section Division of Corporations
SUBJECT: 6 VO King PCB 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:
Aymen Kenawy Name of Person
Name of Person
$\sim$
Firm/Company
3890 Jenks ave
Address Address
LVAN haven, I-L 32444
City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Aymen Venguu at (
Name of Fordal S
Enclosed is a check for the following amount:
1\$125.00 Filing Fee Certificate of Status  Certified Copy (additional copy is enclosed)  \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing AddressStreet/Courier AddressRegistration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 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:

Gyro King PCB	nited Liability Company, "L.L.C.," or "LLC.")
ARTICLE II - Address:	of the principal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
3890 Jenus Ove Ivan Hoven, FL 32444	Same Barrer
	gistered Office, & Registered Agent's Signature: own Registered Agent. You must designate an individual or another to of the registered agent are:
Aymen M 3890 Jen	Name  VS OVE  street address (P.O. Box NOT acceptable)
Lynn Haven	•
liability company at the place design registered agent and agree to act in th all statutes relating to the proper and	t and to accept service of process for the above stated limited ated in this certificate, I hereby accept the appointment as is capacity. I further agree to comply with the provisions of complete performance of my duties, and I am familiar with on as registered agent as provided for in Chapter 608, F.S

(CONTINUED)

Registered Agent's Signature (REQUIRED)

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:

"MGR" = Manager "MGRM" = Managing Member	
<u>CED</u>	Aymen Venauy
	Jynn Haven, FL 32444
	* H. S.
	<u> </u>
(Use attachment if necessary)	<b>平</b> 72 72 72 72 72 72 72 72 72 72 72 72 72
CLE V: Effective date, if other than the	
effective date is listed, the date mus to or 90 days after the date of filing.)	t be specific and cannot be more than five business

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. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)

Typed or printed name of signee

Filing Fees:

**REQUIRED SIGNATURE:** 

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)