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J. Stavers MAR 1 7 2014

COVER LETTER

TO:	Registration Division of C	section Corporations			
SUBJI	ECT: <u>Gunge</u>	r Homes, L.L.C. Name of Lir	nited Liability Company		
The en	closed Articles	of Organization and fee(s) as	re submitted for filing.		
Please	return all corre	spondence concerning this m	atter to the following:		
	Edward	Delson			
			Name of Person		
	-		Firm/Company		.
	<u>28365 S</u>	ombrero Dr.	Address		
	Bonita S	prings, Florida 34135	Sity/State and Zip Code		
<u>.e</u> j	odelson@com	ncast.net E-mail address: (to be use	d for future annual report	notification)	
For fu	ther information	on concerning this matter, ple		Ź	
Edwa	rd Delson	at (239) 390-9571		
LVIII		me of Person		time Telepho	one Number
Enclos	ed is a check fo	or the following amount:			
□ \$125.0	00 Filing Fee	☑\$130.00 Filing Fee & Certificate of Status	□\$155.00 Filing Fee Certified Copy (additional copy is enc	closed)	\$160.00 Filing Fee, Certificate of Status & Certified Copy Iditional copy is enclosed)
	<u>Ma</u>	iling Address	Street/Cour	ier Address	

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 - Name: The name of the Limited Liability Company is:		
Gunger Homes, L.L.C.		
(Must end with the words "Limited L	iability Company, "L.L.C.," or "LLC.")	
ARTICLE II - Address: The mailing address and street address of the principal offi	ce of the Limited Liability Company is:	
Principal Office Address:	Mailing Address:	
28365 Sombrero Dr. Bonita Springs, FL 34135	28365 Sombrero Dr. Bonita Springs, FL 34135	
ARTICLE III - Registered Agent, Registered Office, & (The Limited Liability Company cannot serve as its own R another business entity with an active Florida registration.	egistered Agent. You must designate an inc	lividual or
The name and the Florida street address of the registered a	gent are:	
Edward Delson		
Name	725 T. 175	الله الله الله الله الله الله الله الله
28365 Sombrero Dr.		·
Florida street address (P.O. Box 1	NOT acceptable)	jeg.
Bonita Springs	FL 34135	7
City	Zip Si	ි යුතු * ලා
Having been named as registered agent and to accept serve the place designated in this certificate, I hereby accept to capacity. I further agree to comply with the provisions of of my duties, and I am familiar with and accept the obligation. Chapter	ice of process for the above stated limited lic the appointment as registered agent and agr all statutes relating to the proper and comp	ubility company at ee to act in this lete performance
Coplan	~	
Registered Agent's Signatu	re (REQUIRED)	
(CONTINUE)	D)	

Page 1 of 2

<u>Title:</u> "AMBR" = Authorized Member	Name and Address:
"MGR" = Manager	
Edward Delson AMB ?	28365 Sombrero Dr
	Bonita Springs, FL 34135
Johnathan Gunger APAR	27614 Imperial River Rd.
	Bonita Springs, FL 34134
•	(OPTIONAL)
ective date is listed, the date must be soffiling.) E VI: Other provisions, if any.	te of filing: (OPTIONAL) pecific and cannot be more than five business days prior to or
E V: Effective date, if other than the date ective date is listed, the date must be sof filing.) E VI: Other provisions, if any.	pecific and cannot be more than five business days prior to or
E V: Effective date, if other than the date ective date is listed, the date must be sof filing.) E VI: Other provisions, if any.	pecific and cannot be more than five business days prior to or
E V: Effective date, if other than the date ective date is listed, the date must be sof filing.) E VI: Other provisions, if any.	pecific and cannot be more than five business days prior to or
E V: Effective date, if other than the date ective date is listed, the date must be sof filing.) E VI: Other provisions, if any.	pecific and cannot be more than five business days prior to or
EV: Effective date, if other than the date ective date is listed, the date must be so of filing.) EVI: Other provisions, if any. REQUIRED SIGNATURE:	pecific and cannot be more than five business days prior to or
E V: Effective date, if other than the date ective date is listed, the date must be sof filing.) E VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a m (In accordance with section 6 constitutes an affirmation und I am aware that any false info	pecific and cannot be more than five business days prior to or
E V: Effective date, if other than the date ective date is listed, the date must be spot filing.) E VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a m (In accordance with section to constitutes an affirmation und I am aware that any false info constitutes a third degree felo	pecific and cannot be more than five business days prior to or tember or an authorized representative of a member. 505.0203 (1) (b), Florida Statutes, the execution of this document der the penalties of perjury that the facts stated herein are true. The permation submitted in a document to the Department of State.

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