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COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: glearl, LLC Name of Li	imited Liability Company
The enclosed Articles of Organization and fee(s) a Please return all correspondence concerning this n	•
r lease return an correspondence concerning this in	natter to the following.
Gary J Earl	Name of Person
gjearl, LLC	Firm/Company
3229 Woodland Drive	Address
Edgewater, Florida, 32141	
	City/State and Zip Code
gjearl@cfl.rr.com E-mail address: (to be use	ed for future annual report notification)
For further information concerning this matter, ple	ease call:
Gary J Earl at (386) 690-9501
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 & ☐\$160.00 Filing Fee, Certified Copy (additional copy is enclosed) ☐\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
<u>Mailing Address</u> Registration Section	Street/Courier Address Registration Section
Division of Corporations	Division of Corporations

Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

P.O. Box 6327

Tallahassee, FL 32314

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limi		ny ie:		
The name of the Lint	ica Diability Compa	my is.		
gjearl, LLC.				
•	(Must end with the v	words "Limited Liabili	ty Company, "L.L.C.,"	or "LLC.")
ARTICLE II - Addr The mailing address a		the principal office of	the Limited Liability C	ompany is:
Principal Office Add	lress:	<u>Ma</u>	iling Address:	
3229 Woodland Dri Edgewater, Florida			29 Woodland Drive pewater, Florida 3214	1
The name and the Flo.	rida street address o		ure:	
	Gary J Earl	Name		
	3229 Woodland Florida street add	Drive dress (P.O. Box <u>NOT</u>	acceptable)	•
	Edgewater	F	32141	
	•	City	Zip	
the place designate capacity. I further a	ed in this certificate, igree to comply with	I hereby accept the ap the provisions of all st	pointment as registered atutes relating to the pro s of my position as regis	ated limited liability company at agent and agree to act in this oper and complete performance atered agent as provided for in
	Registered	Agent's Signature (R)	EQUIRED)	
		(CONTINUED)	•	UL -7
		Page 1 of 2		

AMBR Gary J Earl 3229 Woodland Drive Edgewater, Florida 32141 Use attachment if necessary) 2. V: Effective date, if other than the date of filing: July 7, 2014 (OPTIONAL ctive date is listed, the date must be specific and cannot be more than five business days prior to filing.) 2. VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a member for an authorized representative of a member. (In accordance with section 605.02/03 (1) (b), Florida Statutes, the execution of this docu constitutes an affirmation under the penaltyes of perjury that the facts stated herein are truled in a may be a state of the penalty of th	
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The name and address of each person authorized to manage and control the Limited Liability Company:

ARTICLE IV-