Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850) 617-6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone : (850)222-1092 Fax Number : (850)878-5368

**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.

Gameco Holdings, LLC

Certificate of Status	0
Certified Copy	1
Page Count	04
Estimated Charge	\$155.00

Electronic Filing Menu

Corporate Filing Menu

def 123 2014

T HAMPTON

https://efile.sunbiz.org/scripts/efilcovr.exe

10/22/2014

COVER LETTER

TO:	Registration Division of (Section Corporations		
SUBJ	ECT: Gameo	Holdings, LLC Name of Lir	nited Liability Campany	
The er	nclosed Articles	of Organization and fee(s) a	re submitted for filing.	
Please	return all corre	spondence concerning this m	atter to the following:	
	Andrew \	V. Marks		
		···	Name of Person	
		 	Firm/Company	
	2252 lbis	[e]#		
	2232 1913	13:0	Address	
	Palm Bea	ch. FL 33480		
			City/State and Zip Code	
<u>.ai</u>	marks@phoeniz	E-mail address: (to be use	d for future annual report notifier	ation)
For fu	rther informatio	n concerning this matter, ple	ase call:	
Andro	w W. Marks	at (312) 948-4103	
		ne of Person	Area Code Daytime Te	lephone Number
Enclos	sed is a check fo	or the following amount:		
(1) \$125.1	00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	☐\$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	S160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
		Ling Address Istration Section	Street/Courier Add Registration Section	1833
		ining of Comments on	Division of Commen	**

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

Gamco Holdings, LLC				
1)	Must end with the words "Limi	ed Liability Co	inpany, "L.L.C.," or	"LI.C.")
ARTICLE II - Addre	\$5:			
The maiting address an	d street address of the principa	l office of the l	imited Llubility Cor	ipany is:
Principa) Office Addr	<u> (ess.</u>	Mailing	Address;	
5555 (C) (.)				
2252 lbis Isle		SAME		
Prilm Beach, F1, 33480 ARTICLE III - Regist (The Limited Liability)	tered Agent, Registered Offic Company cannot serve as its o	e, & Registere	d Agent's Signatur	e:
Prilm Beach, F1, 33480 ARTICLE III - Regist The Limited Liability mother business entity	tered Agent, Registered Office	e, & Registered wn Registered tion.)	d Agent's Signatur	e:
Prilm Beach, F1, 33480 ARTICLE III - Regist The Limited Liability mother business entity	tered Agent, Registered Office Company cannot serve as its or with an active Florida registra ida street address of the registe	e, & Registered wn Registered tion.)	ed Agent's Signatur Agent, You must des	e:
Prilm Beach, F1, 33480 ARTICLE III - Regist The Limited Liability mother business entity	tered Agent, Registered Office Company cannot serve as its or with an active Florida registra ida street address of the registe	ee, & Registers wn Registered tion.) red agent are:	ed Agent's Signatur Agent, You must des	e:
Prilm Beach, F1, 33480 ARTICLE III - Regist The Limited Liability mother business entity	tered Agent, Registered Offic Company cannot serve as its or with an active Florida registra ida street address of the registe CT Campa	ee, & Registers wn Registered tion.) red agent are:	ed Agent's Signatur Agent, You must des	e:
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Prilm Beach, F1, 33480 ARTICLE III - Regist The Limited Liability mother business entity	tered Agent, Registered Offic Company cannot serve as its or with an active Florida registral ida street address of the registe <u>C.T. Company</u> Na	re, & Registered tion.) red agent are: rution System me	d Agent's Signatur Agent. You must des	e:

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 605, F.S.

By: (REQUIRED)

James M. Halpin Assistant Secretary

(CONTINUED)
Proge 1 of 2

Title:	Name and Address:
*AMBR" = Authorized Member	Milite and Mod 455
"MGR" = Manager	
MOR	Andrew W. Marks
· · · · · · · · · · · · · · · · · · ·	2252 bis sle
	Palm Beach, FL 33480
(Use attachment if necessary)	
LE V: Effective date, if other than the date fective date is listed, the date must be sp	c of liling: (OPTIONAL) sectific and cannot be more than five business days prior to or 9
TLE V: Effective date, if other than the date ffective date is listed, the date must be spec of filing.) TLE VI: Other provisions, if any.	
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