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COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: American Gald Realty 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:
DANA L. Panichella Name of Person
American Gald Realty
2963 PAPIL Street Address
MA: AMA FL 32446
City/State and Zip Code DANA PANICLEMA @ mail (Con E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
\$125.00 Filing Fee \$130.00 Filing Fee \$ \$155.00 Filing Fee \$ \$160.00 Filing Fee. Certificate of Status Certified Copy Certificate of Status &

Mailing Address

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

Street Address

(additional copy is enclosed)

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

Certified Copy

(additional copy is enclosed)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:	Mailing Address:
2963 PACK St	2963 PARIC Street
mariana FC	MARIANNA FL
32446	32446

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

The name and the Florida street address of the registered agent are:

Z963 PACK Street
Florida street address (P.O. Box NOT acceptable)

MAritana FL 32446
City State Zip

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 oft-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.

(CONTINUED)

Page 1 of 2

Title: "AMBR" = Authorized "MGR" = Manager	Member	Name and Address:
	-	
	-	
	-	
(Use attachment if nece	essary)	
of filing.) If the date inserted in this	s block does not meet	iling: Ot June 15. (OPTIONAL) ic and cannot be more than five business days prior to or 90 the applicable statutory filing requirements, this date will not state's records.
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