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JUN - 1 2015 T SCHROEDER



FLORIDA DEPARTMENT OF STATE Division of Corporations

May 19, 2015

DUANE GAINER 255 SARATOGA BLVD E ROYAL PALM BEACH, FL 33411

SUBJECT: GAINER ENTERPRISES, LLC

Ref. Number: W15000035382

We have received your document for GAINER ENTERPRISES, LLC and your check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all the appropriate places. One or more words may be added to make the name distinguishable from the one presently on file. A search for name availability can be made on the Internet through the Division's records at www.sunbiz.org.

Please note the name of a limited liability company must contain the words "Limited Liability Company," the abbreviation "L.L.C.", or the designation "LLC". The following suffixes are no longer acceptable: "Limited Company," "L.C.," "LC.," "Ltd.," and "Co."

The document number of the name conflict is M04000005360 (GAINER ENTERPRISES, LLC).

You must insert the title or capacity of person(s) authorized to manage this limited liability company above the name(s) and address(es) listed. Such titles may include: Manager (MGR), Authorized Member (AMBR), AuthorizedPerson (AP), or Authorized Representative (AR).

Please return 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) 245-6051.

Terri J Schroeder Regulatory Specialist II

Letter Number: 215A00010486

www.sunbiz.org

COVER LETTER

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TO:	Registration Secti Division of Corpo				
SUBJE		Enterprises, LLC			
			imited Liabil	ty Company	
The enc	losed Articles of Or	ganization and fee(s) a	ire submitted	for filing.	
Please re	eturn all correspond	ence concerning this n	natter to the f	ollowing:	
	Duane Gainer				
			Name of	Person	
	D.R. Gainer En	teprises, LLC			
	.,		Firm/Co	mpany	
	255 Saratoga B	vd, E,			
•			Addr	ess	
	Royal Palm Bea	ch, Florida 33411			
			City/State and	d Zip Code	
	thegainerfamily@	· · · · · · · · · · · · · · · · · · ·			
	E-m	ail address: (to be use	d for future a	nnual report notificat	ion)
For furthe	r information conce	rning this matter, plea	se call:		
	Duane Gainer	at (561	721-1116	
	Name o		Area Code	Daytime Telephor	ne Number
Enclose	d is a check for the t	ollowing amount:			
\$125.00		130.00 Filing Fee & Certificate of Status	Certific	0 Filing Fee & ed Copy al copy is enclosed)	\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing A			Street Address	
	Registratio Division o	n Section f Corporations		Registration Section Division of Corporat	ions

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

The name of the Limited Liabili	ity Company is:		
D.R. Gainer Enterpr (Must end		Liability Co	ompany, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street a	ddress of the principal off	ice of the L	imited Liability Company is:
Princip	oal Office Address:		Mailing Address:
255 Saratoga Blvd. Royal Palm Beach,			255 Saratoga Blvd. East Royal Palm Beach, Fl. 33411
ARTICLE III - Registered Ag (The Limited Liability Company another business entity with an The name and the Florida street	y cannot serve as its own F active Florida registration address of the registered a Duane Gainer	Registered A .) agent are:	ed Agent's Signature: Agent. You must designate an individual or
		Name	
	255 Saratoga Blvd. Ea Florida street address		NOT accentable)
		•	
	Royal Palm Beach City	Fl. State	33411 Zip
place designated in this certificate further agree to comply with the p	, I hereby accept the appoi rovisions of all statutes rela bligations of my position as	intment as realing to the sregistered	for the above stated limited liability company at the egistered agent and agree to act in this capacity. I proper and complete performance of my duties, and agent as provided for in Chapter 605, F.S Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

ARTICLE IV- . The name and address of each person authorized to manage and control the Limited Liability Company:

Title:				Manie and	Address:				
"AMBR" = A "MGR" = Ma		viember							
AMBR				Laura Gain	er				
				255 Sarato	ga Blvd. East				
				Royal Palm	Beach, Fl. 33	411			_
MGR				Duane Gair	ner				
				255 Saratog	ga Blvd. East				_
				Royal Palm	Beach, Fl. 33	411		· · · · · · · · · · · · · · · · · · ·	
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