

LA00011323A

Florida Department of State Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations
Fax Number : (850) 617-6381

From:

Account Name : CORP USA
Account Number : 072450003255
Phone : (305) 634-3694
Fax Number : (305) 633-9696

****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. GITI 3061, LLC

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

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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TALLAHASSEE, FLORIDA

15 JUL -6 PM 3:02

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97116

415220164908

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: GITI 3061, 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:

EDWARD CHONG
Name of Person
GITI 3061, LLC
Firm/Company
2090 NW 21st STREET
Address
MIAMI, FL 33142
City/State and Zip Code
traffic@bellsouth.net
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

EDWARD CHONG 305 576-5868
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 & Certified Copy (additional copy is enclosed)
☐ \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

Mailing Address
New Filing Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address
New Filing Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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TALLAHASSEE, FLORIDA

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

GITI 3061, LLC

(Must end with the words "Limited Liability Company," "L.L.C.," or "LLC.")

ARTICLE II - Address:

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

Principal Office Address:

2090 NW 21st STREET
MIAMI, FL 33142

Mailing Address:

2090 NW 21st STREET
MIAMI, FL 33142

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:

EDWARD CHONG

Name

2090 NW 21st STREET

Florida street address (P.O. Box NOT acceptable)

MIAMI

FL

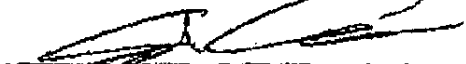
33142

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 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.


Registered Agent's Signature (REQUIRED)

ARTICLE IV.

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

Title:
"AMBR" = Authorized Member
"MGR" = Manager
AMBR/MGR

Name and Address:

EDWARD CHONG
2090 NW 21st STREET
MIAMI, FL 33142

AMBR/MGR

HYON HUI CHONG
3090 NW 21st STREET
MIAMI, FL 33142

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: _____ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

ARTICLE VI: Other provisions, if any.

DIVISION OF SHARES EQUALLY DIVIDED AS - EDWARD CHONG 50% & HYON HUI CHONG 50%

REQUIRED SIGNATURE:



Signature of a member or an authorized representative of a member.
This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes.
I am aware that any false information submitted in a document to the Department of State
constitutes a third degree felony as provided for in s. 817.155, F.S.

EDWARD CHONG

Typed or printed name of signer

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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