## 116000064802

(Re	questor's Name)	
(Ad	dress)	
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at/04/16

## **COVER LETTER**

	Registration Section Division of Corporations	
SUBJEC	GLOBAL FACILITIES MANAGEMENT	GROUP, LLC
SUBJEC	Name of Limited L	iability Company
The enclo	osed Articles of Organization and fee(s) are subm	itted for filing.
Please ret	turn all correspondence concerning this matter to	the following:
	MICHEL SAADEH	
	Nan	ne of Person
	GLOBAL FACILITIES MANAGEMENT G	ROUP, LLC
	Firm	n/Company
	434 TERRACINA COURT	
	4	Address
	NAPLES, FLORIDA 34119	
	City/Sta MICHELSAADEH@VINEYARDSNAPLES.	te and Zip Code
	E-mail address: (to be used for fut	
For further	information concerning this matter, please call:	
	MICHEL SAADEH 239	825-5959
	Name of Person Area Co	de Daytime Telephone Number
Enclosed	is a check for the following amount:	
	Filing Fee \$130.00 Filing Fee & Certificate of Status	\$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

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I'- Name: The name of the Limited Liability Company is:	
GLOBAL FACILITIES MANAGEMENT GROUP,	LLC
(Must end with the words "Limited Liability	ty Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the principal office of  Principal Office Address:	the Limited Liability Company is:  Mailing Address:
434 TERRACINA COURT	434 TERRACINA COURT
NAPLES, FLORIDA 34119	NAPLES, FLORIDA 34119
ARTICLE III - Registered Agent, Registered Office, & Registered Liability Company cannot serve as its own Register	stered Agent's Signature

MICHEL SAADEH

Name

434 TERRACINA COURT

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

NAPLES

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

FLORIDA

34119

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..

(CONTINUED)

Registered Agent's Signature (REQUIRED)

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

Title: "AMBR" = Authorized Member	Name and Address:
"MGR" = Manager	
MGR – Manager MGR	MICHEL SAADEH
	434 TERRACINA COURT
	NAPLES, FLORIDA 34119
AMBR	ANTHONY CARLONE
	6017 PINE RIDGE RD
	NAPLES, FLORIDA 34119
AMBR	JOSEPH D. COLLEA III
AMBK	2852 SW 25th AVENUE
	CAPE CORAL FLORIDA 33914
	O.M.D. GORGA T. BONKD/1999.1
AMBR	RICHARD MUTHUA
<del></del>	1685 OAKBROOK LAKE DRIVE
	NORCROSS, GA 30093
If an effective date is listed, the date must b the date of filing.)	date of filing:
This document is ex I am aware that any	a member or an authorized representative of a member. secuted in accordance with section 605.0203 (1) (b), Florida Statutes. false information submitted in a document to the Department of State egree felony as provided for in s.817.155, F.S.
MICHEL SA	ADEU

Filing Fees:

Typed or printed name of signee

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)

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