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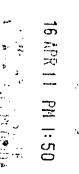
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APR 15 2016 S. GILBERT

COVER LETTER

	Registration Section Division of Corporations		
SUBJEC	GXN HOLDING	SS, LLC.	
Sebuce		f Limited Liabi	lity Company
The enclo	sed Articles of Organization and fee(s	s) are submitted	d for filing.
Please ret	urn all correspondence concerning thi	s matter to the	following:
	GEORGE NOVITSKY		
		Name o	f Person
	GXN HOLDINGS, LLC		
		Firm/Co	ompany
	2000 RIDLEY TERRACE		
		Add	ress
	THE VILLAGES, FL 32162	City/State as	nd Zip Code
	E-mail address: (to be u	used for future	annual report notification)
For further i	information concerning this matter, pl	lease call:	
	GEORGE NOVITSKY	352	633-0003
	Name of Person	Area Code	Daytime Telephone Number
Enclosed i	s a check for the following amount:		
\$125.00 F	iling Fee \$130.00 Filing Fee & Certificate of Status	Certif	\$160.00 Filing Fee, ied Copy cal 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

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ame of the Limited Liabi	lity Company is:			16 APR
GXN HOLDINGS				
(Must en	d with the words "Limited Lia	ability Company, "L	L.C.," or "LLC.")	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
TCLE II - Address: mailing address and street	address of the principal office	e of the Limited Lia	bility Company is:	
<u>Princi</u>	ipal Office Address:		Mailing Address	<u>s</u> :
2000 BIBLEV TE	DDACE	2000 01	DLEY TERRACE	
2000 RIDLEY TEI	RRACE	2000 K	Den i Diagres	
THE VILLAGES, CLE III - Registered A Limited Liability Comparer business entity with an	gent, Registered Office, & Formula Formula Formula Formula Registration.) et address of the registered age	THE VI	LLAGES, FL 32162 Signature:	ridual or
ICLE III - Registered A Limited Liability Compar er business entity with ar	r September 1988 FL 32162 gent, Registered Office, & Formula and Formula Registration.) et address of the registered age GEORGE NOVITSKY	THE VI	LLAGES, FL 32162 Signature:	ridual or
THE VILLAGES, ICLE III - Registered A Limited Liability Comparer business entity with ar	r September 1988 FL 32162 gent, Registered Office, & Formula and Formula Registration.) et address of the registered age GEORGE NOVITSKY	Registered Agent's gistered Agent. You ent are:	LLAGES, FL 32162 Signature:	ridual or
THE VILLAGES, CICLE III - Registered A Limited Liability Comparer business entity with an	regent, Registered Office, & Formula Registered Office, & Formula Registration.) et address of the registered age GEORGE NOVITSKY	Registered Agent's gistered Agent. You ent are:	LLAGES, FL 32162 Signature: I must designate an indiv	ridual or
THE VILLAGES, TICLE III - Registered A Limited Liability Comparer business entity with an	gent, Registered Office, & Formula Registered Office, & Formula Registration.) et address of the registered age GEORGE NOVITSKY No. 2000 RIDLEY TERRAC	Registered Agent's gistered Agent. You ent are:	LLAGES, FL 32162 Signature: I must designate an indiv	ridual or

Page 1 of 2

(CONTINUED)

<u>Title:</u> "AMBR" = Authorized Member	Name and Address:
"MGR" = Manager	
AMBR	GEORGE NOVITSKY
	2000 RIDLEY TERRACE
	THE VILLAGES, FL 32162
ective date is listed, the date must be spec of filing.)	of filing: 5 BUSINESS DAYS PRIOR FILI. (OPTIONAL) cific and cannot be more than five business days prior to or 90
EV: Effective date, if other than the date of ective date is listed, the date must be specifiling.)	eific and cannot be more than five business days prior to or 90 eet the applicable statutory filing requirements, this date will not
EV: Effective date, if other than the date of dective date is listed, the date must be specifiling.) The date inserted in this block does not me	eific and cannot be more than five business days prior to or 90 eet the applicable statutory filing requirements, this date will not
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EV: Effective date, if other than the date of ective date is listed, the date must be specifiling.) The date inserted in this block does not mement's effective date on the Department of EVI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a memory that document is execute I am aware that any false in the service of the s	et the applicable statutory filing requirements, this date will not f State's records. There or an authorized representative of a member. d in accordance with section 605.0203 (1) (B), Florida Statutes. Information submitted in a document to the Department of State
EV: Effective date, if other than the date of ective date is listed, the date must be specifiling.) The date inserted in this block does not mement's effective date on the Department of EVI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a memory that document is execute I am aware that any false in the service of the s	et the applicable statutory filing requirements, this date will not f State's records. There or an authorized representative of a member of in accordance with section 605.0203 (1) (B), Florida Statutes. Information submitted in a document of the Department of State felony as provided for in s.817.155 F.S.
EV: Effective date, if other than the date of ective date is listed, the date must be specifiling.) The date inserted in this block does not mement's effective date on the Department of EVI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a men This document is execute I am aware that any false is constitutes a third degree:	et the applicable statutory filing requirements, this date will not f State's records. There or an authorized representative of a member. In accordance with section 605.0203 (1) (B), Florida Statutes. Information submitted in a document to the Department of State felony as provided for in s.817.155 F.S.