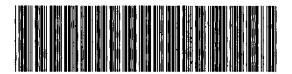
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(Re	questor's Name)	
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PICK-UP	☐ WAIT	MAIL
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## **COVER LETTER**

	egistration Section ivision of Corporations		
SUBJECT	Gutch and Gutch Properties, LLC	C	
SUBJECT		f Limited Liabili	ty Company
The enclos	ed Articles of Organization and fee(	s) are submitted	for filing.
Please retu	rn all correspondence concerning th	is matter to the f	ollowing:
	James Gutch		
		Name of	Person
	Gutch and Gutch Properties, LLC		
		Firm/Co	mpany
	186 Linder Dr		
		Addre	ess
	Homosassa, FL 34446		
	jgutch@tampabay.rr.com	City/State and	d Zip Code
-	E-mail address: (to be	used for future a	nnual report notification)
For further in	nformation concerning this matter, p	lease call:	
	James Gutch	352	503-6703
	Name of Person	Area Code	Daytime Telephone Number
Enclosed is	s a check for the following amount:		
\$125.00 F	Siling Fee \$130.00 Filing Fee Certificate of Statu	s LLCertific	0 Filing Fee & S160.00 Filing Fee, cd Copy 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

Gutch and Gutch P			
(Must en	d with the words "Limited	Liability Company	y, "L.L.C.," or "LLC.")
ARTICLE II - Address:			
The mailing address and street	address of the principal of	ffice of the Limited	Liability Company is:
Princi	ipal Office Address:		Mailing Address:
186 Linder Dr		186	Linder Dr
TT 777 A			
(The Limited Liability Compai	gent, Registered Office, only cannot serve as its own	& Registered Age Registered Agent.	
ARTICLE III - Registered A	gent, Registered Office, only cannot serve as its own active Florida registration address of the registered	& Registered Age Registered Agent. n.)	nt's Signature:
ARTICLE III - Registered A (The Limited Liability Compai another business entity with ar	gent, Registered Office, only cannot serve as its own active Florida registration	& Registered Age Registered Agent. n.) agent are:	
ARTICLE III - Registered A (The Limited Liability Compai another business entity with ar	gent, Registered Office, only cannot serve as its own active Florida registration address of the registered	& Registered Age Registered Agent. n.)	nt's Signature:
ARTICLE III - Registered A (The Limited Liability Compai another business entity with ar	gent, Registered Office, only cannot serve as its own active Florida registration address of the registered	& Registered Age Registered Agent. n.) agent are:	nt's Signature:
ARTICLE III - Registered A (The Limited Liability Compai another business entity with ar	gent, Registered Office, only cannot serve as its own active Florida registration at address of the registered  James Gutch	& Registered Age Registered Agent. n.) agent are:	nt's Signature: You must designate an individual
ARTICLE III - Registered A (The Limited Liability Compai another business entity with ar	gent, Registered Office, only cannot serve as its own active Florida registration at address of the registered  James Gutch	& Registered Age Registered Agent. n.) agent are:	nt's Signature: You must designate an individual

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)

(CONTINUED)

Page 1 of 2

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

Title:	Name and Address:
"AMBR" = Authorized Member	
"MGR" = Manager	
MGR	James Gutch
	186 Linder Dr
	Homosassa, FL 34446
AMBR	Katherine Gutch
	186 Linder Dr
	Homosassa, FL 34446
	<u></u>
<del></del>	
(Use attachment if necessary)	
(If an effective date is listed, the date must be s the date of filing.)	te of filing: 06-01-16 (OPTIONAL)  specific and cannot be more than five business days prior to or 90 days after  t meet the applicable statutory filing requirements, this date will not be listed as
the document's effective date on the Departmen	it of State's records.
ARTICLE VI: Other provisions, if any.	
· <del></del>	
REQUIRED SIGNAPORE:	
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Signature of a	member or an authorized representative of a member.
This document is exec	cuted in accordance with section 605.0203 (1) (b), Florida Statutes.
I am aware that any fa	lse information submitted in a document to the Department of State ree felony as provided for in s.817.155, F.S.
- JAMES	T. GUTCH

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)