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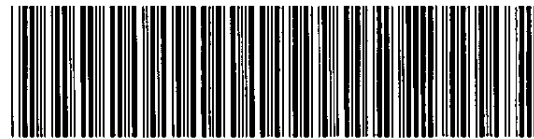
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14 3/23/17

**COVER LETTER**

**TO: New Filing Section  
Division of Corporations**

**SUBJECT:** Robert C. Gates Consulting, 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:

Robert C. Gates

Name of Person

Robert C. Gates Consulting, LLC

Firm/Company

P. O. Box 689

Address

Panacea, FL 32346

City/State and Zip Code

sapper8900@yahoo.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Robert C. Gates

704

907-3213

at ( )

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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

March 23, 2017

ROBERT C. GATES  
GATES CONSULTING, LLC  
P.O. BOX 689  
PANACEA, FL 32346

SUBJECT: GATES CONSULTING, LLC  
Ref. Number: W17000025077

We have received your document for GATES CONSULTING, LLC and your check(s) totaling \$125.00. 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 administratively dissolved/revoked entity. Names of administratively dissolved/revoked entities are not available for one year from the date of administrative dissolution/revocation unless the dissolved/revoked entity provides the Department of State with an affidavit or letter stating that they have no intention of reinstating, therefore, releasing the name for use to another entity.

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) 245-6052.

Neysa Culligan  
Regulatory Specialist II

Letter Number: 517A00005624

**ARTICLES OF ORGANIZATION  
OF ROBERT C. GATES CONSULTING, LLC**

The undersigned certifies that he desires to become a limited liability company under the laws of the State of Florida, providing for the formation, rights, privileges, and immunities of limited liability companies for profit.

**ARTICLE I**

The name of the limited liability company shall be Robert C. Gates Consulting, LLC.

**ARTICLE II**

The limited liability company is organized for any lawful purpose or purposes.

**ARTICLE III**

The mailing address and the street address of the principal office of the limited liability company are:

**Mailing:**

P.O. Box 689  
Panacea, FL 32346

**Principal office:**

4226 St. Teresa Ave.  
St. Teresa, FL 32358.

**ARTICLE IV**

The initial street address of the limited liability company's registered office is 1018 Thomasville Rd., Ste. 111-A, Tallahassee, Florida 32303. The name of the company's initial registered agent at that address is David B. Switalski.

**ARTICLE V**

Management and control of this limited liability company is reserved to its members, which consists of one person, whose name and address is as follows:

Robert C. Gates, AMBR  
P.O. Box 689  
Panacea, FL 32346

**ARTICLE VI**

The effective date of the limited liability company shall be the date these Articles of Organization are filed with the Florida Department of State.

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DIVISION OF CORPORATIONS  
17 MAR 29 AM 10:40

Robert C .  
The undersigned, being the original member of the limited liability company, certifies that this instrument constitutes the proposed articles of organization of Gates Consulting, LLC, and is executed in accordance with section 605.0203(1)(b), Florida Statutes. The undersigned is 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.

Executed by the undersigned at Tallahassee, Leon County, Florida on March 27, 2017.

  
ROBERT C. GATES, Authorized Member

#### ACCEPTANCE OF REGISTERED AGENT

Having been named as registered agent and to accept service of process for ROBERT C. GATES CONSULTING, LLC, at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this a 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.

  
DAVID B. SWITALSKI

3-27-17  
Date

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