Page 1 of 2

## Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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## FLORIDA LIMITED LIABILITY CO. GK 1240 EUCLID, LLC

Certificate of Status	0
Certified Copy	0
Page Count	03
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12/19/2017

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

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The name of the Limited Liability Company is:

GK 1240 Euclid, LLC

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

## AKTICLE II - Address:

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

Princh	nat Offi	co Address:	

Mailing Address:

340 W. Flagler Street	340 W. Flagler Street
Suite 209	Suite 209
Miami, FL 33130	Miami, FL 33130

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:

Stewart M. Mirmell	, Esq.	
•	Name	
340 W. Flagler Stree	x, #209	
Florida street addres		cceptable)
Miami	FL	33130
City	State	2ip

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 fumiliar 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)

M DEC 19 PH 6: 12

MGR Stewart M. Mirmelli, Esq.  Stewart M. Mirmelli, Esq.  340 W. Flagter Street, Suite 209  Miami, FL 33130   V: Effective date, if other than the date of filing:  (OPTIONAL)  the date is listed, the date must be specific and cannot be more than five business days prior to or 90 day filing.)  and date inserted in this block does not meet the applicable statutory filing requirements, this date will not be left's effective date on the Department of State's records.  VI: Other provisions, if any.  ROUTRED 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.  Signature of a member or	"AMBR" = Authorized Member "MGR" = Manager MGR	
Stewart M. Mirmelli, Esq.  Typed or printed name of signer  Filing Fees:  Stewart M. Mirmelli, Esq.  Typed or printed name of signer  Filing Fees:  Stewart M. Mirmelli, Esq.  Typed or printed name of signer  Filing Fees:  Stewart M. Optional)  Stewart M. Optional)	MGR - Manager MGR	
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