

Division of Corporations

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Florida Department of State
Division of Corporations
Electronic Filings

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To: Division of Corporations
Fax Number : (350) 617-6381

From: Account Name : SAUL, EWING, ARNSTEIN & LEHR, LLP
Account Number : 120060000021
Phone : (561) 833-9800
Fax Number : (561) 655-5551

19 MAR 18 AM 2:15
FILED
CLERK OF STATE
TALLAHASSEE, FLORIDA

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: Antoinette.Theodossakos@saul.com

**FLORIDA LIMITED LIABILITY CO.
GOOSE HILL PARTNERS, LLC**

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$125.00

Electronic Filing Menu

Corporate Filing Menu

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MAR 19 2019
C. Kinsey

COVER LETTER

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

SUBJECT: GOOSE HILL PARTNERS, 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:

Antionette Theodorosakos

Name of Person

Saul Ewing Artstein & Lehr LLP

Firm/Company

515 N. Flagler Drive, Suite 1400

Address

West Palm Beach, FL 33401

City/State and Zip Code

Antionette.Theodorosakos@saal.com

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

For further information concerning this matter, please call:

Antionette Theodorosakos

561

833-9800

Name of Person

at (_____) _____
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 1327
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:

GOOSE HILL PARTNERS, LLC

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

ARTICLE II - Address:

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

Principal Office Address:124 Churchill Road
West Palm Beach, FL 33405**Mailing Address:**124 Churchill Road
West Palm Beach, FL 33405**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:

Antionette Theodosakos
Name315 N. Flagler Drive, Suite 1400
Florida street address (P.O. Box **NOT** acceptable)West Palm Beach, FL 33401
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.

Antionette Theodosakos
Registered Agent's Signature (REQUIRED)

(CONTINUED)

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LLC
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RECEIVED
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ARTICLE IV-

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

Title:

"AMBR" = Authorized Member

"MGR" = Manager

Manager

Name and Address:

David Gallitano

124 Churchill Road

West Palm Beach, FL 33405

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: _____ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

ARTICLE VI: Other provisio is, if any.

REQUIRED 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.

David Gallitano

Typed or printed name of signee

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

5 5.00 Certificate of Status (Optional)

OFFICE OF THE
ASSISTANT
ATTORNEY GENERAL

19 MAR 18 4:15

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