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Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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To: Division of Corporations  
Fax Number : (950) 617-6381

From: Account Name : FILE RIGHT LLC  
Account Number : 120170000091  
Phone : (719) 378-5811  
Fax Number : (719) 732-4580

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

Email Address: sales@fileacorp.com

FLORIDA LIMITED LIABILITY CO.  
GB DEALS LLC

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

2019 MAR 20 08:10:08

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SECRETARY OF STATE  
TALLAHASSEE, FL

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## COVER LETTER

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

**SUBJECT:** GBIDEALSLLC

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:

Name of Person

FILERIGHTLLC

Firm/Company

531416THAVENUESUTE139

Address

BROOKLYN,NY11204

City/State and Zip Code

sales@fileacorp.com

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

For further information concerning this matter, please call:

RACHEL.

718

878-5811

at (

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

☒

75125.00 Filing Fee

\$130.00 Filing Fee & Certificate of Status



☐ \$155.00 Filing Fee &  
Certified Copy  
(additional copy is enclosed)

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☐ \$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

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## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

## ARTICLE I - Name:

The name of the Limited Liability Company is:

GB DEALS 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:6601 LYONS ROAD E6  
COCONUT CREEK FL 33073Mailing Address:6601 LYONS ROAD E6  
COCONUT CREEK FL 33073

## ARTICLE III - Registered Agent, Registered Office, &amp; 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:

BUSINESS FILINGS INCORPORATED

Name

1200 SOUTH PINE ISLAND ROADFlorida street address (P.O. Box **NOT** acceptable)PLANTATIONFL33326

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.

Andria Goulage, Asst Sec. Business Filings Incorporated  
Registered Agent's Signature (REQUIRED)

(CONTINUED)

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