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DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA
APR 29 AM 10:19
DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

CORPORATION SERVICE COMPANY
1201 Hays Street
Tallahassee, FL 32301
Phone: 850-558-1500

ACCOUNT NO. : I20000000195

REFERENCE : 743444 4326501

AUTHORIZATION :

COST LIMIT : \$125.00

ORDER DATE : April 29, 2019

ORDER TIME : 10:25 AM

ORDER NO. : 743444-005

CUSTOMER NO: 4326501

DOMESTIC FILING

NAME: GS ONSIGHT HOLDINGS, LLC

EFFECTIVE DATE:

____ ARTICLES OF INCORPORATION
____ CERTIFICATE OF LIMITED PARTNERSHIP
XX ARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

____ CERTIFIED COPY
XX PLAIN STAMPED COPY
____ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Lydia Cohen - EXT. 62974

EXAMINER'S INITIALS: _____

**ARTICLES OF ORGANIZATION
OF
GS ONSIGHT HOLDINGS, LLC,
A FLORIDA LIMITED LIABILITY COMPANY**

ARTICLE I. NAME

The name of the limited liability company is GS OnSight Holdings, LLC (the "Limited Liability Company").

ARTICLE II. STREET ADDRESS AND MAILING ADDRESS

The street address and mailing address of the principal office of the Limited Liability Company is 900 Central Park Drive, Sanford, Florida 32771.

ARTICLE III. PURPOSE

The purpose for which the Limited Liability Company is organized is any and all lawful business that may be authorized pursuant to the Florida Revised Limited Liability Company Act.

ARTICLE IV. REGISTERED AGENT, OFFICE AND REGISTERED AGENT'S SIGNATURE

The name and Florida street address of the Limited Liability Company's registered agent are Corporation Service Company, 1201 Hays St, Tallahassee, FL 32301.

ARTICLE IV. MANAGING MEMBER

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

Gene Sanderfield
900 Central Park Drive
Sanford, Florida 32771

Date: April 29, 2019


Jolene Beaty, Authorized Person

In accordance with Section 605.0203 of the Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. 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 Section 817.155 of the Florida Statutes.

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19 APR 29 AM 10:19
STATE
TALLAHASSEE, FLORIDA

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT

Having been named Registered Agent of GS OnSight Holdings, LLC and to accept service of process for the Company at the place designated in these Articles of Organization, the undersigned hereby accepts the appointment as Registered Agent and agrees to act in this capacity. The undersigned further agrees to comply with the provisions of all statutes relating to the proper and complete performance of its duties and it is familiar with and accepts the obligations of its position as Registered Agent this 09 day of April, 2019.

By _____
Name: _____
Title: _____

Lydia Cohen
Asst. Vice President

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CLERK OF STATE
AT TAMPA, FLORIDA