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'FLORIDA CAPITAL COURIER SERVICES, INC 2330 CLARE DRIVE TALLAHASSEE, FL 32309 **(**850) 524-5437 (850) 524-6243 (OFFICE USE ONLY) Corporation Name & Document Number, (if known): Docket Gold Properties LLC Corporation Name) Document # _X Walk in Pick up time ____ Will wait ___ Mail out Certified Copy Photocopy Certificate of Good Standing **NEW FILINGS AMMENDMENTS** ___ Amendment Profit Resignation of R.A. Officer/Director Not for Profit ____Change of Registered Agent X Limited Liability Dissolution/Withdrawal Domestication Other Merger **OTHER FILINGS** REGISTERATION/OUALIFICATIONS Annual Report Foreign Limited Partnership Fictitious Name Reinstatement Trademark Other ____ APOSTIL

COUNTRY

EXAMINER'S INITIALS:____

COVER LETTER

	New Filing Section Division of Corporations			
SURJEC	Docket Gold Properties L	LC		
SCHOLC	Docket Gold Properties L	Name of Limited Liab	oility Company	
The encl	osed Articles of Organization a	nd fee(s) are submitt	ed for filing.	
Please re	turn all correspondence concer	ning this matter to th	e following.	
	Anthony J. Gargano			
		Name	of Person	
	Docket Gold Properties LL	C		
		Firm (Company	
	2240 West First Street Suit	e 105		
		Ad	dress	
	Fon Myers, Florida 33901			
		City'State	and Zip Code	
	rgargano@garganolaw.com	tto be used for future	e annual report notificat	ion)
For further	information concerning this it			•
	Anthony J Gargano		229-7166)	
	Name of Person		Daytime Telephon	
Fuclosed	is a check for the following an	nount:		
	_	iling Fee & S	155.00 Filing Fee & ified Copy onal copy is euclosed)	☐\$160.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Address		Street Address	
New Filing Section			New Filing Section Division The Course of Tallahassee	

New Filing Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

New Filing Section Division
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

ARTICLES OF ORGANIZATION FOR FLORIDALIMITED LIABILITY COMPANY

Docket Gold Proper	ties LLC			
(Must con	tain the words "Limited I	Liability Company.	"L.L.C" or "LLC.")	
RTICLE II - Address: he mailing address and street a	address of the principal of	ffice of the Limited	Liability Company is:	
Princip	Principal Office Address:		Mailing Address:	
2240 West First Street Suite 105		224	2240 West First Street Suite 105	
Fort Myers, Florida 33901			Fort Myers, Florida 33901	
ARTICLE III - Registered Ag The Lumited Liability Compan	33901 tent, Registered Office, or y cannot serve as its own	& Registered Age Registered Agent.		
ARTICLE III - Registered Ag The Lumited Liability Compan mother business entity with an	ept, Registered Office, or y cannot serve as its own active Florida registration address of the registered	& Registered Agent. Registered Agent.	nt's Signature:	
ARTICLE III - Registered Ag The Lumited Liability Compan mother business entity with an	gent, Registered Office, or y cannot serve as its own active Florida registratio	& Registered Agent. Registered Agent. n.) agent are:	nt's Signature:	
ARTICLE III - Registered Ag The Lumited Liability Compan mother business entity with an	ept, Registered Office, or y cannot serve as its own active Florida registration address of the registered	& Registered Agent. Registered Agent.	nt's Signature:	
ARTICLE III - Registered Ag	ent, Registered Office, or cannot serve as its own active Florida registration address of the registered Anthony J. Gargano	& Registered Agent. Registered Agent. n.) agent are:	nt's Signature:	
ARTICLE III - Registered Ag The Lumited Liability Compan mother business entity with an	ept, Registered Office, or y cannot serve as its own active Florida registration address of the registered	& Registered Agent. Registered Agent. n.) agent are: Name	nt's Signature: You must designate au individu	
ARTICLE III - Registered Ag The Lumited Liability Compan mother business entity with an	sent, Registered Office, y cannot serve as its own active Florida registratio address of the registered Anthony J. Gargano. 2240 West First Street	& Registered Agent. Registered Agent. n.) agent are: Name	nt's Signature: You must designate au individu	

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.

Registered Agent's Signature (REQUIRED)

(CONTINUED)

ARTICLE IV-

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

Title:	Name and Address:
"AMBR" = Authorized Member	
"MGR" = Manager	
MGR	Anthony J. Gargano 2240 West First Street Suite 105
	Fort Myers, Florida 33901
	100.000
MGR	Robert Scalinge
	2240 West First Street Suite 105
	Fort Myers, Florida 33901
1157	William B. Fuccillo, Jr.
MGR	2240 West First Street Suite 105
	Fort Myers, Florida 33901
	700.32,433,430,00
(Use attachment if necessary)	
ARTICLE V: Effective date, if other than the dat	e of filing: (OPTIONAL)
	pecific and cannot be more than five business days prior to or 90 days after
the date of filing.)	
	meet the applicable statutory filing requirements, this date will not be listed as
the document's effective date on the Departmen	t of State's records.
ARTICLE VI: Other provisions, if any.	
REQUIRED SIGNATURE:	
Austra	Songano
ć	
	nember or an authorized representative of a member.
	uted in accordance with section 605.0203 (1) (b). Florida Statutes, se information submitted in a document to the Department of State
	ee felony as provided for in s.817.155. F.S.
Committee a time degr	

Typed or printed name of signce

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

- \$ 30.00 Certified Copy (Optional)
- S 5.00 Certificate of Status (Optional)

Anthony J. Gargano