

L20000326517

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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OCT 22 2020

2020 OCT 22 PM 12:30

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REC'D VFD

Sunshine State Corporate Compliance Company

3458 Lakeshore Drive Tallahassee, Florida 32312

(850) 656-4724

DATE 10/22/2020

****WALK IN****

ENTITY NAME GAYLIS OPPORTUNITY FUND LLC

DOCUMENT NUMBER _____

****PLEASE FILE THE ATTACHED AND RETURN****

XXXX

Plain Copy

Certified Copy

Certificate of Status

****PLEASE OBTAIN THE FOLLOWING FOR THE ABOVE ENTITY****

Certified Copy of Arts & Amendments

Certified Copy of Arts & Amendments Complete File (Including Annual Reports)

Certificate of Status

Certificate of Status Reflecting: _____

****APOSTILLE / NOTARIAL CERTIFICATION****

COUNTRY OF DESTINATION _____

NUMBER OF CERTIFICATES REQUESTED _____

TOTAL OWED \$ 125.00

ACCOUNT # I20140000108
United Corporate
Services, Inc.

Keith Leppard

Please call Tina at the above number for any issues or concerns. Thank you so much!

**ARTICLES OF ORGANIZATION
OF
GAYLIS OPPORTUNITY FUND LLC**

ARTICLE I: - Name

The name of the Limited Liability Company is:

GAYLIS OPPORTUNITY FUND LLC

ARTICLE II: - Address

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

**179 Ocean Blvd.
Ocean Beach, Florida 33160**

ARTICLE III: - Registered Agent, Registered Office, & Registered Agent's Signature

The name and the Florida street address of the registered agent are:

**Les Adler
KSDT CPA'S
9300 S Dadeland Blvd
Suite 600
Miami, Florida 33156**

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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.

DocuSigned by:

Leslie Adler

EE42101E319AAAF

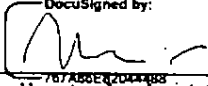
Les Adler, Registered Agent

ARTICLE IV: - Management

The name and address of the member authorized to manage and control the Limited Liability Company is:

<u>Title</u>	<u>Name and Address</u>
AMBR	Norman Gaylis 179 Ocean Blvd. Ocean Beach, Florida 33160

IN WITNESS WHEREOF, the undersigned has executed these Articles of Organization on October 20, 2020.

DocuSigned by:

767A50E8204488

Norman Gaylis, Authorized Signer

(In accordance with section 605.0203(1)(b), 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, Florida Statutes.)

Norman Gaylis
Typed or printed name of signee