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# **COVER LETTER**

TO: New Filing Section

**Division of Corporations** 

SUBJECT: GIBRALTAR USA LLC

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Gary M. Brandenburg Brandenburg & Associates, P.A. 421 SE Osceola Street, Suite B Stuart, FL 34994

Email address (for future annual report notifications): gary@brandenburgpa.com

For further information concerning this matter, please call:

Gary M. Brandenburg at 561-371-1824

Enclosed is a check for the following amount:

\_\_\_\$125 Filing Fee

\_\_\$130.00 Filing Fee & Certificate of Status

\_\_\_\$155.00 Filing Fee & Certified Copy (additional copy is enclosed) X\_\$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 The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

# **ARTICLE I**

The name of the Limited Liability Company is:

Gibraltar USA LLC

# **ARTICLE II**

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

421 SE Osceola Street, Suite B Stuart, FL 34994

The mailing address of the Limited Liability Company is:

421 SE Osceola Street, Suite B Stuart, FL 34994

# **ARTICLE III**

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

Gary M. Brandenburg 421 SE Osceola Street, Suite B Stuart, FL 34994

who is authorized to execute and file these Articles of Organization, and any other records, with the Florida Secretary of State and any other governmental entities.

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 Signature:

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# **ARTICLE IV**

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

<u>Title:</u> <u>Name and Address:</u>

MGR Gary M. Brandenburg

421 SE Osceola Street, Suite B

Stuart, FL 34994

## **ARTICLE V**

The name and address of members of the LLC are:

Mitch Cohen 340 Mallard Road Weston, FL 33327 Matthew Kanter 13080 Rosewood Lane Palm Beach Gardens, FL 33418

# **ARTICLE VI**

The effective date for this Limited Liability Company shall be October 13, 2021.

# **ARTICLE VII**

The purpose of this limited liability company shall be to conduct any and all business authorized and legal under the laws of the State of Florida, USA.

Signature of member or an authorized representative of a member:

Signature:

I am the member of authorized representative submitting these Articles of Organization and affirm that the facts stated herein are true. I am aware that 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. I understand the requirement to file an annual report between January 1<sup>st</sup> and May 1<sup>st</sup> in the calendar year following formation of the LLC and every year thereafter to maintain "active" status.