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(A	ddress)	
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TALLAHAS SEE. FLORIDA

RECEIVED

022 JUN - 9 PM 3:

## **COVER LETTER**

TO: New Filing Section Division of Corporations
SUBJECT: GS Interior Solutions LLC 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:
Serafim Tymko Gennady Soko Lov
GS Interior Solutions LLC
Firm/Company
3123 Webber 3t
Address
Sarasota FL 34239
Serafin tymko a gmail.com
E-mail address: (to be used for fature annual report notification)
For further information concerning this matter, please call:
Sevafim Tymles at (503) 740-8733  Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
S125.00 Filing Fee Status S155.00 Filing Fee Status 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

FILED

The name of the Limited Liability Company is:

2022 JUN - 9 PM 3: 22

(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:	Mailing Address:
3123 Webber St	Same
Sara Sota FL 34239	

ARTICLE III - Registered Agent, Registered Office, & 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:

Sevafin Tymko

Name

3123 Webber 34

Florida street address (P.O. Box NOT acceptable)

Sava Social Florida 34239

Savasota FZ 34239
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.

Registered Agent's Signature (REQUIRED)

(CONTINUED)

Title: "AMBR" = Authorized Member "MGR" = Manager	Name and Address:	
MGR	Serafim Tymko 3123 Webber St Sarasota FL 34239	
MGR	Gennadiy Sokolov	
(Use attachment if necessary)	sarasota F 34239	
the date of filing.)	necific and cannot be more than five business days prior to or 90 da meet the applicable statutory filing requirements, this date will not be t of State's records.	
REQUIRED SIGNATURE:		<u> </u>
This document is exec I am aware that any fal	tember or in authorized representative of a member.  auted in accordance with section 605.0203 (1) (b), Florida Statutes.  See information submitted in a document to the Department of Statutes are felony as provided for in s.817.155, F.S.  Typed or printed name of signee	n
	SSG. TO	M
\$125,00 Filing Fee for Articles of O	rganization and Designation of Registered Agent	
\$ 30.00 Certified Copy (Optional)	\(\frac{1}{2}\) \(\frac{1}{2}\)	_
\$ 5.00 Certificate of Status (Option	nal) (lan	

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

ARTICLE IV-