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To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : LYONS & LYONS, P.A.

Account Number : I20030000061 Phone : (239)948-1823

Fax Number : (239)948-1826

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address: wadeging@yahoo.com

FLORIDA LIMITED LIABILITY CO. **GINGISLES FHC, LLC** 

Certificate of Status 0 Certified Copy Page Count 03 Estimated Charge \$125.00

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## ARTICLES OF ORGANIZATION OF GINGISLES FHC, LLC

ARTICLE I - NAME

The name of the limited liability company is Gingisles FHC, LLC (the "Company").

ARTICLE II - ADDRESS

The mailing address and street address of the principal office of the Company is:

Principal Office Address: 3001 Pine Tree Drive Mailing Address: 3001 Pine Tree Drive Bonita Springs, Florida 34134

Bonita Springs, Florida 34134

## ARTICLE III - REGISTERED AGENT, REGISTERED OFFICE, & REGISTERED AGENT'S SIGNATURE

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

Wade Gingerich 3001 Pine Tree Drive Bonita Springs, Florida 34134

Having been named as registered agent and to accept service of process that he move stated limited liability company at the place designated in this certificate. I here the appointment as registered agent and agree to act in this capacity. I further agree to the provisions of all statutes relating to the proper and complete performance of myllaties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S.

Whate Gingerich

Wade Gingerich

(((11220004341073)))

### ARTICLE IV - MANAGERS OR MEMBERS

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

Title: Name and Address:

"MGR" = Manager

"AMBR" = Authorized Member

MGR Wade Gingerich

3001 Pine Tree Drive

Bonita Springs, Florida 34134

MGR Danielle Gingerich

3001 Pine Tree Drive

Bonita Springs, Florida 34134

ARTICLE V - EFFECTIVE DATE

The effective date of the company shall be January 1, 2023.

# REQUIRED SIGNATURE:

Signature of a member or an authorized representative of a specier. 28

This document is executed in accordance with section 605.0203(1)(b). Florida Statutes. I am aware that any liake information submitted in a document to the Bopartment of State constitutes a third degree felony as provided for in s.817.155. F.S.

Wade Gingerich

Typed or printed name of signee