L24000116573

Florida Department of State

Division of Corporations

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H24000096349 3)))

H24000963493ABC4

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations
Fax Number : (850)617-6381

From:

Account Name : SHUTTS & BOWEN, LLP
Account Number : 076647000313
Phone : (305)358-9166
Fax Number : (305)347-7748

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

Email Address: PRahaghi@shutts.com

FILED
2024 MAR 12 AM 11:24
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2024 MAR 12 PM 3:15

FLORIDA LIMITED LIABILITY CO.
GMT BROKERS LLC

Certificate of Status	1
Certified Copy	1
Page Count	02
Estimated Charge	$160.00

Electronic Filing Menu Corporate Filing Menu Help

(((H24000096349 3)))

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name

The name of the Limited Liability Company is:

GMT BROKERS LLC

ARTICLE II – Street Address

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

1951 SW 179th Ave
Miramar, FL 33029

ARTICLE III – Mailing Address

The mailing address of the principal office of the Limited Liability Company is as follows:

1951 SW 179th Ave
Miramar, FL 33029

ARTICLE IV – Management

The Company shall be managed by one or more managers, and is thus a manager-managed limited liability company. The initial manager of the Company shall be **Gregory Phillip Holt.**

ARTICLE V - Registered Agent and Office and Registered Agent's Signature

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

Gregory Phillip Holt
1951 SW 179th Ave
Miramar, FL 33029

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, Florida Statutes.

By: _____
(Registered Agent's Signature)
Gregory Phillip Holt

FILED
2024 MAR 12 AM 11:24
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Signature of a member or an authorized representative of a member.
Gregory Phillip Holt, Authorized Representative

(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 s.817.155, Florida Statutes)