

Division of Corporations

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Florida Department of State
Division of Corporations
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(((H24000167776 3)))



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To:

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

From:

Account Name : BARRON & REDDING, P.A.
Account Number : 073617000710
Phone : (850)785-7454
Fax Number : (850)785-2999

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

Email Address: _____

**FLORIDA LIMITED LIABILITY CO.
G3 TECHNICAL SOLUTIONS, LLC**

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$125.00

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REDDING P.A.**
www.barronredding.com

DEMPSEY J. BARRON
1922-2001

BENJAMIN W. REDDING
Of Counsel

May 8, 2024

SENT VIA FAX

Division of Corporations
Florida Department of State
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303
NewFilingsCorpHelp@DOS.MyFlorida.com


RE: Conveyance of property located at 58 Hidaigo Drive,
Panama City, FL 32409

Dear Mr. or Mrs.:

Please accept the enclosed (1) Article of Organization for G3 Technical Solutions, LLC for filing purposes. Please don't hesitate to call if you have any questions regarding this matter.

Very truly yours,

BARRON & REDDING, P.A.


Laura W. Pentel-Klang

LPK/dd

2024 MAY - 9 PM 8:01

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**ARTICLES OF ORGANIZATION FOR
G3 TECHNICAL SOLUTIONS, LLC**

**ARTICLE I
NAME**

The name of the limited liability company is **G3 TECHNICAL SOLUTIONS, LLC**

**ARTICLE II
ADDRESS**

The mailing address and street address of the principal office of the limited liability company are:

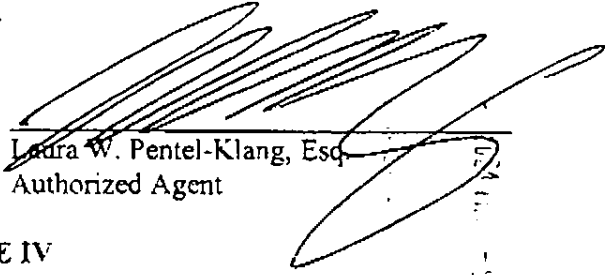
Principal Office Address
3415 Fanning Branch Road
Vernon, FL 32462

Mailing Address
3415 Fanning Branch Road
Vernon, FL 32462

**ARTICLE III
REGISTERED AGENT**

The name and Florida street address of the registered agent is Barron & Redding, P.A., 220 McKenzie Avenue, Panama City, FL 32401.

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 provision of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent as provided for in Chapter 605, F.S.


Laura W. Pentel-Klang, Esq.
Authorized Agent

**ARTICLE IV
MANAGEMENT**

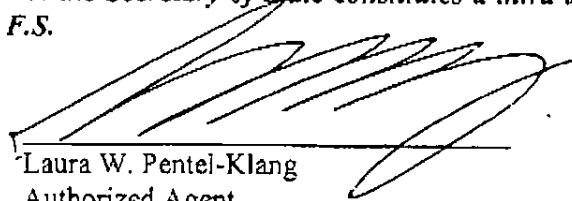
The name and address of the Manager is as follows:

Robert P. Gibson
1217 Dundee Lane
Lynn Haven, FL 32444

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In accordance with Section 605.0203(1)(b), F.S., the execution of this document constitutes an affirmation under penalties of perjury that the facts stated herein are true. I am aware that any false information submitted in a document to the Secretary of State constitutes a third degree felony as provided for in Section 817.155, F.S.



Laura W. Pentel-Klang
Authorized Agent

2024 MAY -3 11:01
FAX

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