# LZ4000Z3444

| (Requestor's Name)                      |
|---|
| ( rogassion o manne)                    |
| (Address)                               |
|   |
| (Address)                               |
|   |
| (City/State/Zip/Phone #)                |
| PICK-UP WAIT MAIL                       |
|   |
| (Business Entity Name)                  |
|   |
| (Document Number)                       |
| Certified Copies Certificates of Status |
| ·                                       |
| Special Instructions to Filing Officer: |
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|   |

Office Use Only



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2024 MAY 30 KI 9: 47

# CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301 (850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

| Ansorg Gal Construction LLC        |  |
|------------------------------------|--|
| Please Debit FCA000000003 For: 125 |  |
| Thank you Seth Neeley              |  |
| 145/                               |  |
| - Holy                             | Art of Inc. File                                   |
|                                    | LTD Parmership File                                |
|                                    | Foreign Corp. File                                 |
|                                    | L.C. File  |
|                                    | Fictitious Name File                               |
|                                    | Trade/Service Mark                                 |
|                                    | Merger File  |
|                                    | Att. of Amend. File                                |
|                                    | RA Resignation                                     |
|                                    | Dissolution / Withdrawal                           |
|                                    | Annual Report / Reinstatement                      |
|                                    | Сеп. Сору  |
|                                    | Photo Copy   |
|                                    | Certificate of Good Standing Certificate of Status |
|                                    | Certificate of Status                              |
|                                    | Certificate of Fictitious Name                     |
|                                    | Corp Record Search                                 |
| ,                                  | Officer Search                                     |
|                                    | Fictitious Search                                  |
| Signature                          | Fictitious Owner Search                            |
| Signature                          | Vehicle Search                                     |
|                                    | Driving Record                                     |
| Requested by:                      | UCC 1 or 3 File                                    |
|                                    | UCC 11 Search                                      |
| Name Date Time                     | UCC 11 Retrieval                                   |
| Walk-In Will Pick Up               | Courier  |

#### COVER LETTER

|             | New Filing Sec<br>Division of Co |  |               |   |           |   |             |
|-------------|----------------------------------|--|---------------|---|-----------|---|-------------|
|             |                                  | GAL CONSTRUCTION   | i LLC         |   |           |   |             |
| SUBJEC      | 1:                               | Name of I  | imited Liab   | ility Company   |           | _                                       |             |
| The enclo   | osed Articles of                 | Organization and fee(s)                                    | are submitte  | d for filing.   |           |   |             |
| Please ret  | urn all correspo                 | ondence concerning this                                    | matter to the | following:  |           |   |             |
|             | AVIV ASOI                        | JLIN   |               |   |           |   |             |
|             |                                  |  | Name o        | f Person  |           |   |             |
|             | EPGD BUSI                        | NESS LAW   |               |   |           |   |             |
|             | <del></del>                      | <del></del>  | Firm/C        | ompany  |           |   |             |
|             | 777 S.W. 37                      | TH AVE- STE, 510   |               |   |           |   |             |
|             |                                  |  | Ado           | lress   |           |   |             |
|             | MIAMI, FL 33135                  |  |               |   |           |   |             |
|             |                                  |  | City/State a  | nd Zip Code   |           |   |             |
|             | aviv@epgdlav                     | v.com<br>E-mail address: (to be use                        | ed for future | annual report notificat   |           |   |             |
| r 6 b       |                                  |  |               | umuu, report notintuu   | .5,       |   | <b>&gt;</b> |
| ror iurtner | information co                   | ncerning this matter, plea                                 |               |   |           |   | ñ2). ,      |
|             | Aviv Asoulin                     | at (   | 786           | 837-6787<br>)   |           | 3                                       |             |
|             | Nam                              | e of Person  | Area Code     | Daytime Telephon  | e Number  |   |             |
| Enclosed    | is a check for the               | ne following amount:                                       |               |   |           | 1 S 1 S 1 S 1 S 1 S 1 S 1 S 1 S 1 S 1 S | £ <b>1</b>  |
| ≣\$125.0    | 0 Filing Fee                     | □\$130.00 Filing Fee<br>Certificate of Status              | Certi         | 55.00 Filing Fee &<br>fied Copy<br>nal copy is enclosed)                      | Certified | ite of Status &                         | d)          |
|             | New Fi<br>Divisio                | g Address<br>ling Section<br>on of Corporations<br>ox 6327 |               | Street Address New Filing Section D The Centre of Tallah: 2415 N. Monroe Stre | assee     |   |             |

Tallahassee, FL 32314

Tallahassee, FL 32303

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

| ARTICLE 1 - Name: The name of the Limited Liability  | Company is:                          |  |
|--|--------------------------------------|--|
| ANSORG GAL CON   |                                      |  |
| (Must conta  | in the words "Limited Liability C    | ompany, "L.L.C.," or "LLC.")   |
| ARTICLE II - Address:<br>The mailing address and street ad   | dress of the principal office of the | Limited Liability Company is:  |
| <u>Principa</u>  | l Office Address:                    | Mailing Address:   |
| 10384 W SR 84, UNI   | T 12, DAVIE. FL 33324                | 10384 W SR 84, UNIT 12, DAVIE. FL 333.                                 |
| ARTICLE III - Registered Ages<br>(The Limited Liability Company of<br>another business entity with an ac | cannot serve as its own Registered   | red Agent's Signature:<br>I Agent. You must designate an individual or |
| The name and the Florida street a  | ddress of the registered agent are:  |  |
|  | EPGD ATTORNEYS AT LAW                | /, P.A   |
|  | Name                                 |  |
|  | 777 SW 37TH AVE, STE 510             |  |
|  | Florida street address (P.O. Box     | x NOT acceptable)  |

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..

MIAMI

City

Registered Agent's Signature (REQUIRED)

**FLORIDA** 

State

(CONTINUED)

## ARTICLE IV-

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

| Title:  | Name and Address:  |  |
|---|--|--|
| "AMBR" = Authorized Member "MGR" = Manager                          |  |  |
| ū   | FDAN CAL   |  |
| MGR   | <u>FDAN GAL</u><br>10384 W SR 84 UNIT 12 DAVIE, FL 33:   | 324  |
|   |  |  |
|   | OFFIN GUTTA VALOROGER  |  |
| MGR   | <u> OFIR SHTAYNBERGER</u><br>10384 W SR 84 <u>UNIT 12 DAVIE, FL 33</u>                                   | 324  |
|   |  |  |
|   | WARL DIRIGH ANCORG   |  |
| MGR   | KARL-ULRICH ANSORG<br>10384 W SR 84 UNIT 12 DAVIE, FL 33:  | 324  |
|   |  |  |
|   | CHANG THE DIVION   |  |
| MGR   | CHRIS GUARINON<br>10384 W SR 84 UNIT 12 DAVIE, FL 33   | 324  |
|   |  | <del></del>                                |
|   |  |  |
| (Use attachment if necessary)                                       |  |  |
| ARTICLE V: Effective date, if other than the                        | date of filing: (  | (OPTIONAL)                                 |
| If an effective date is listed, the date must be                    | e specific and cannot be more than five business of  | days prior to or 90 days after             |
| he date of filing.) Note: If the date inserted in this block does n | ot meet the applicable statutory filing requirement  | ts, this date will not be listed as        |
| the document's effective date on the Departm                        |  | 02 <sup>4</sup>                            |
| ARTICLE VI: Other provisions, if any.                               |  | = 7  |
| <u> </u>  |  |  |
|   |  |  |
|   |  |  |
| REQUIRED SIGNATURE:   | <i>f</i>   | 9:4  |
|   | when   | 5  |
| Signature of a  | member or an authorized representative of a n  | nember.                                    |
| This document is ex   | ecuted in accordance with section 605.0203 (1) (b)<br>Talse information submitted in a document to the D | ), Florida Statutes.<br>epartment of State |
|   | gree felony as provided for in s.817.155, F.S.   |  |

Filing Fees:

Typed or printed name of signee

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)