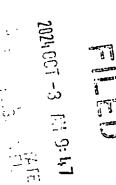
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(Requestor's Name)
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PICK-UP WAIT MAIL
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1024 OCT -3 AM II: 2 SECOLIARY OF STAT ALL ARASSEE FROM

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CSC - Tallahassee CSC · 1201 Hays Street Tallahassee, FL 32301-2607 850-558-1500, Ext:

To: Department Of State, Division Of Corporations

From: Ben Bolen

Ext:

Date: 10/03/24 Order #: 1637610-1 Re: GC Trustee LLC

Processing Method: Routine

TO WHOM IT MAY CONCERN:

Enclosed please find:

Certificate of Formation/Incorporation

Amount to be deducted from our State Account: \$125 - FL State Account Number:

12000000195

Please take the following action:

File in your office on basis

Issue Proof of Filing

Special Instructions:

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

ARTICLES OF ORGANIZATION

OF

GC TRUSTEE LLC

The undersigned, being authorized to execute and file these Articles of Organization as of this 2nd day of October 2024, hereby certifies that:

The name of the limited liability company shall be GC TRUSTEE LLC.

The principal place of business of the company is 1521 Alton Rd., Suite 718, Miami Beach, FL 33139. The mailing address is 1521 Alton Rd., Suite 718, Miami Beach, FL 33139.

The name of the limited liability company's registered agent in Florida is Corporation Service Company and its address is Corporation Service Company, 1201 Hays Street, Tallahassee, Fl 32301-2525.

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 application, 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 relative to the proper and complete performance of my duties, and I am familiar with and I accept the obligations of my position as registered agent.

Corporation Service Company

By: Amanda Miller
Name/Title:

The purpose for which the limited liability company is formed is to conduct or promote any lawful purpose within or without the State of Florida.

I am the member or authorized representative submitting these Articles of Organization and affirm that the facts stated herein are true. I am aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided in s.817.155, F.S. I understand the requirement to file an annual report between January 1st and May 1st in the calendar year following formation of the LLC and every year thereafter to maintain "active" status.:

/s/ Keli C. Whitlock
Name: Keli C Whitlock, Authorized Person