

TRANSMITTAL LETTER
FOR FLORIDA LIMITED LIABILITY COMPANY

L95000000540

Department of State
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

1000001532921
-07/10/95--01009--001
****293.75 ****293.75

SUBJECT: GIAN/CHAPMAN INVESTMENT GROUP, L.C.
(Proposed limited liability company name - must include suffix)

FILED
95 JUL -7 PM12:21
STATE OF FLORIDA
TALLAHASSEE, FLORIDA

Enclosed is an original and one (1) copy of the articles of organization and a check for

☐ \$285.00
Filing Fee
& Registered
Agent designation

☒ \$293.75
Filing Fee,
Registered Agent
Designation &
Certificate

☐ \$337.50
Filing Fee,
Registered Agent
Designation &
Certified Copy

☐ \$346.25
Filing Fee,
Registered Agent
Designation,
Certified Copy &
Certificate

FROM: Joseph Giangrosso
Name (Printed or typed)

5033 Delvin Court
Address

Orlando, FL 32821
City, State & Zip

407 - 239-3894
Daytime Telephone number

NOT
7-12-95

NOTE: Please provide the original and one copy of the articles.

FILED

95 JUL -7 PM 12:21

CLERK OF STATE
TALLAHASSEE, FLORIDA

ARTICLES OF ORGANIZATION

OF

GIAN/CHAPMAN INVESTMENT GROUP, L.C.

We, the undersigned subscribers of these Articles of Association, each a natural person competent to contract, do hereby associate ourselves together for the purpose of forming a limited liability company under Florida Statutes, Section 608.407, and other laws of the state of Florida, and to that end do hereby certify to the facts herein set forth as required by law.

ARTICLE I

NAME

The name of this limited liability company is GIAN/CHAPMAN INVESTMENT GROUP, L.C.

ARTICLE II

PURPOSE

This limited liability company may engage in or transact in any or all lawful activities or business permitted under the laws of the United States, the State of Florida or any other state, country, territory, or nation.

ARTICLE III

ADDRESS

The managers may from time to time change the principal place or address thereof to any other place or address in the State of Florida. The initial address of the principal place of business of the limited liability company shall be:

c/o Giangrosso
5033 Delvin Court
Orlando, FL 32821

ARTICLE IV

TERM

This limited liability company shall have perpetual existence.

ARTICLE V
MANAGEMENT

The limited liability company shall have the following managers initially. The number of managers may be altered from time to time by the by-laws, but there shall never be less than one such manager.

Joseph Giangrosso	5033 Delvin Court	Orlando, FL	32821
Helen Giangrosso	5033 Delvin Court	Orlando, FL	32821

ARTICLE VI
ADMISSION OF ADDITIONAL MEMBERS

The members may admit additional members at any time, upon majority vote of existing members.

ARTICLE VII
MEMBERS' RIGHTS TO CONTINUE BUSINESS

The remaining members of the limited liability company have the right to continue the business on the death, retirement, resignation, expulsion, bankruptcy, or dissolution of a member or the occurrence of any other event which terminates the continued membership of a member of the limited liability company.


ARTICLE VIII
REGISTERED OFFICE AND REGISTERED AGENT

Joseph Giangrosso, of 5033 Delvin Court, Orlando, FL 32821 is designated as the agent to accept service of process within the State of Florida for the limited liability company.

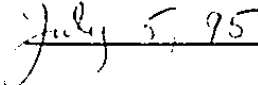
I, Joseph Giangrosso, of 5033 Delvin Court, Orlando, FL 32821 am familiar with and accept the duties and responsibilities as registered agent for Gian/Chapman Investment Group, L.C. as required by Section 608.415 F.S. and Section 608.507.

REGISTERED AGENT

SIGNATURE


Joseph Giangrosso
Registered Agent

DATE


July 5, 95

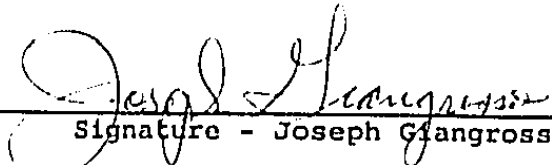
95 JUL -7 PM 12:22
RECORDS & CLERK
STATE
OF FLORIDA

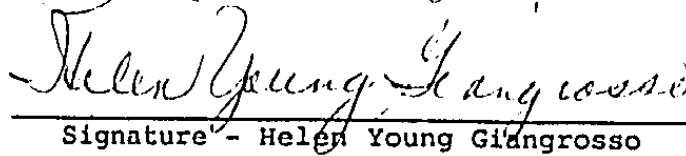
FILED

We, the undersigned, being the original members of the limited liability company herein named, hereunto set our hands at

CITY OF ORLANDO
STATE OF FLORIDA
COUNTY OF ORANGE

This 5th day of July, 1995


Signature - Joseph Giangrosso


Signature - Helen Young Giangrosso

AFFIDAVIT OF MEMBERSHIP AND CONTRIBUTIONS

The undersigned member or authorized representative of a member of GIAN/CHAPMAN INVESTMENT GROUP, L.C. deposes and says:

1. The above named limited liability company has at least two members.
2. The total amount of cash contributed by the member(s) is \$_____
3. If any, the agreed value of property other than cash contributed by member(s) is (a description of which is attached and made part hereto) \$_____
4. The amount of cash or property anticipated to be contributed by member(s) is \$10,000
5. Total \$10,000

Under penalties of perjury, I declare that I have examined the above facts and accompanying attachments, if any, and to the best of my knowledge and belief, they are true, correct, and complete.

Date

July 5, 1995

Joseph A. Langrosso
Signature - Joseph Giangrosso
Authorized Representative

2nd NOTICE: Limited Liability Company Will Be Dissolved On Or After August 21, 1996. If Dissolved, Minimum Amount Due To Reinstato: \$738.75

LIMITED LIABILITY COMPANY ANNUAL REPORT 1996	 FLORIDA DEPARTMENT OF STATE Sandra B. Northam Secretary of State DIVISION OF CORPORATIONS
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FILING FEE \$ 263.75 Annual Report \$100.00 + \$138.75 Corporation Supplemental Fee + \$25.00 LATE FEE
Make Check Payable To: FLORIDA DEPARTMENT OF STATE

1 Name and Mailing Address of Limited Liability Company **DOCUMENT # L95000000540**

GIAN/CHAPMAN INVESTMENT GROUP, L.C.
 5033 DELVIN COURT
 ORLANDO FL 32821

1a Principal Place of Business Address

5033 DELVIN COURT
 ORLANDO FL 32821

If above mailing address is incorrect in any way, line through incorrect information and enter correction in Block 2a

2 Principal Place of Business	2a Mailing Address
State Apt # etc	State Apt # etc
City & State	City & State
Zip	Zip
Country	Country

3 Date Organized or Qualified	3a State of Formation
07/07/1995	FL
4 FIC Number	<input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable
59-332/223	
5 Date of Last Report	6 Certificate of Status Desired
	\$3.75 Additional Fee Required <input type="checkbox"/>

7 Name and Address of Current Registered Agent

GIANGROSSO, JOSEPH
 5033 DELVIN COURT
 ORLANDO FL 32821

8 Name and Address of New Registered Agent

Name _____
 Street Address (P.O. Box Number is Not Acceptable) _____
 State Apt # etc _____
 City _____ Zip Code **FL**

9. Pursuant to the provisions of Sections 608.416 and 608.508 Florida Statutes, the above-named limited liability company submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by affirmative vote of a majority of the members. I hereby accept the appointment as registered agent, and accept the obligations.

SIGNATURE _____ DATE _____

10. Title	Managing Members/Managers	Business Street Address	City, State and Zip Code
MGR	GIANGROSSO, JOSEPH	5033 DELVIN COURT	ORLANDO FL
MGR	GIANGROSSO, HELEN	5033 DELVIN COURT	ORLANDO FL

400001928344
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 ***263.75 ***263.75

7/1/96

11. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(a), Florida Statutes. I further certify that the information indicated on this annual report is true and accurate and that my signature shall have the same legal effect as if made under oath, that I am a managing member or manager of the limited liability company or the recorder or trustee empowered to execute this report as required by Chapter 608, Florida Statutes, and that my name appears in Block 10, or is an attachment with an address.

SIGNATURE: *Joseph V. Giangrosso* 6/19/96 1/07-239-3894