

L220000 15135

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

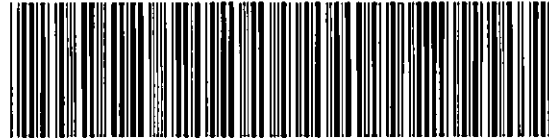
(Business Entity Name)

(Document Number)

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CAPITAL CONNECTION, INC.

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

GAR-RETT & PARTNERS, LLC

- ___ Art of Inc. File _____
- ___ LTD Partnership File _____
- ___ Foreign Corp. File _____
- ___ L.C. File _____
- ___ Fictitious Name File _____
- ___ Trade/Service Mark _____
- ___ Merger File _____
- ___ Art. of Amend. File _____
- ___ RA Resignation _____
- ___ Dissolution / Withdrawal _____
- ___ Annual Report / Reinstatement _____
- ___ Cert. Copy _____
- ___ Photo Copy _____
- ___ Certificate of Good Standing _____
- ___ Certificate of Status _____
- ___ Certificate of Fictitious Name _____
- ___ Corp Record Search _____
- ___ Officer Search _____
- ___ Fictitious Search _____
- ___ Fictitious Owner Search _____
- ___ Vehicle Search _____
- ___ Driving Record _____
- ___ UCC 1 or 3 File _____
- ___ UCC 11 Search _____
- ___ UCC 11 Retrieval _____
- ___ Courier _____

Signature _____

Requested by:

Name _____ Date _____ Time _____

Walk-In _____ Will Pick Up _____

ARTICLES OF ORGANIZATION
OF
GAR-RETT & Partners, LLC
(a Florida Limited Liability Company)

The undersigned executes these Articles of Organization to form a limited liability company under the laws of the State of Florida and declares that the following articles shall serve as the charter and authority for the conduct of business of the limited liability company.

ARTICLE I.
NAME

The name of the limited liability company is GAR-RETT & Partners, LLC.

ARTICLE II.
ADDRESS

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

Principal Office Address:

216 22nd Street West
Bradenton, FL 34205

Mailing Address:

216 22nd Street West
Bradenton, FL 34205

ARTICLE III.
REGISTERED AGENT, REGISTERED OFFICE,
REGISTERED AGENT'S SIGNATURE

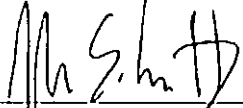
The name and the Florida street address of the registered agent are:

JOSHUA SCHMITT
216 22nd Street West
Bradenton, FL 34205

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

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accept the obligations of my position as registered agent as provided for in chapter 608, Florida Statutes.



Registered Agent Signature

ARTICLE IV.
MANAGERS

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

Title:	Name & Address
Manager	JOSHUA SCHMITT 216 22 nd Street West Bradenton, FL 34205



LORETTA SCHMITT, Member

(This document is executed in accordance with section 605.0203(1)(b), Florida Statutes. 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, F.S.)



JOSHUA SCHMITT, Member

(This document is executed in accordance with section 605.0203(1)(b), Florida Statutes. 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, F.S.)