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| (Re                     | equestor's Name)   |             |
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| (Cit                    | ty/State/Zip/Phone | <b>⇒</b> #) |
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| PICK-UP                 | WAIT               | MAIL        |
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| (Bu                     | isiness Entity Nan | ne)         |
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| (Do                     | ocument Number)    |             |
|                         |                    |             |
| Certified Copies        | _ Certificates     | of Status   |
|                         | •                  |             |
| Considerations to       | Ciling Officer:    | 1           |
| Special Instructions to | Filing Officer:    |             |
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Office Use Only



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10 JUL -2 AH IO: 36
DEFARTHERS OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FEORIDA

RECEIVED

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TO JUL -2 MIN 45

ECRETARY OF STATE

C. LEWIS

JUL 2 2010

EXAMINER

## COVER LETTER

| · TO:  | Registration<br>Division of C |   | 4   | ,   |
|--------|-------------------------------|---|---|---|
| SUB    | JECT: Gold, [                 | Diamond and Watch Buy   |   |   |
|        |                               | Name of Limi  | ted Liability Company   |   |
| The    | enclosed Articles             | of Organization and fee(s) are  | submitted for filing.   |   |
| Pleas  | se return all corre           | spondence concerning this ma  | tter to the following:  |   |
|        | Duane Flora                   | ck  |   |   |
|        |                               |   | Name of Person  |   |
|        | Gold, Diamo                   | nd and Watch Buyers, LL   | .c  |   |
|        |                               |   | Firm/Company  |   |
|        | 316 Fordhan                   | n drive   |   |   |
|        |                               |   | Address   |   |
|        | Lake Worth,                   | Florida 33460   |   |   |
|        |                               | Ci  | ty/State and Zip Code   |   |
|        | wtii2008@gn                   |   | for future annual report notification)  |   |
| For fi | uethar information            | n concerning this matter, pleas   | •   |   |
| POLI   | arther fillormation           | r concerning this matter, preas   | e can.  |   |
| Kath   | y Florack                     |   | at ( 561-267-2284 )   |   |
|        | Namo                          | of Person   | Area Code & Daytime Tele  | phone Number  |
| Enck   | osed is a check f             | or the following amount:  |   |   |
| ☑\$12  | 5.00 Filing Fee               | □\$130.00 Filing Fee & Certificate of Status  | Certified Copy (additional copy is enclosed)  | \$160.00 Filing Fee,<br>Certificate of Status &<br>Certified Copy<br>(additional copy is enclosed |
|        |                               | Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 | Street/Courier Address Registration Section Division of Corporations Clifton Building 2661 Executive Center C Tallahassee, FL 32301 |   |

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

|  | nd and Watch Buye (Must end with the words "Li   | mited Liability Company, "L.L.C.," or "LLC.")   |
|--|--|---|
| ARTICLE II -                                 | · Address:   |   |
|  |  | s of the principal office of the Limited Liability Company  |
| Principal Offi                               | ce Address:  | Mailing Address:  |
| 316 Fordham drive                            |  | same  |
| Lake Worth, Florida                          | 33460  |   |
|  |  |   |
| The Limited Liabili<br>business entity with  | ty Company cannot serve as it<br>an active Florida registration.   | egistered Office, & Registered Agent's Signature: s own Registered Agent. You must designate an individual or another ) ss of the registered agent are:           |
| The Limited Liabili<br>business entity with  | ty Company cannot serve as it<br>an active Florida registration.   | s own Registered Agent. You must designate an individual or another   |
| The Limited Liabili<br>business entity with  | ty Company cannot serve as its<br>n an active Florida registration.<br>The Florida street address                          | s own Registered Agent. You must designate an individual or another  ss of the registered agent are:  |
| (The Limited Liabili<br>business entity with | ty Company cannot serve as its<br>n an active Florida registration.<br>The Florida street address                          | s own Registered Agent. You must designate an individual or another  ss of the registered agent are:  |
| (The Limited Liabili<br>business entity with | ty Company cannot serve as it is an active Florida registration. The Florida street address James Donovan  3046 South Cong | s own Registered Agent. You must designate an individual or another  ss of the registered agent are:  |
| The Limited Liabili<br>business entity with  | ty Company cannot serve as it is an active Florida registration. The Florida street address James Donovan  3046 South Cong | s own Registered Agent. You must designate an individual or another  ss of the registered agent are:  Name  Qress Ave   |
| (The Limited Liabili<br>business entity with | ty Company cannot serve as it is an active Florida registration. The Florida street address James Donovan  3046 South Cong | s own Registered Agent. You must designate an individual or another  Ss of the registered agent are:  Name  Press Ave  a street address (P.O. Box NOT acceptable) |

Registered Agent's Signature (REQUIRED)

(CONTINUED)
Page 1 of 2

FILED

| <u>Title:</u> "MGR" = Manag "MGRM" = Manag  |   | Name and Address:   | SECRETARY<br>TALLAHASSEE       |
|---|---|---|--------------------------------|
| Duane Florack   |   | 316 Fordham drive   |                                |
|   | <del></del>   | Lake Worth, Florida 33460   |                                |
|   |   |   |                                |
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|   |   |   |                                |
| (Use attachment is  | f necessary)  |   |                                |
|   | • /   | data of filing.   | (ODTIONIA)                     |
| (Use attachment in LE V: Effective de Tective date is liste                         | late, if other than the o   | date of filing:   | (OPTIONA)                      |
| LE V: Effective d   | late, if other than the c   | date of filing:specific and cannot be more than   | (OPTIONA)                      |
| LE V: Effective d   | late, if other than the c   | date of filing:   | (OPTIONA<br>five business days |
| LE V: Effective d<br>fective date is list<br>days after the da                      | late, if other than the ced, the date must be te of filing.)  | date of filing:specific and cannot be more than   | (OPTIONAl                      |
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| LE V: Effective d<br>fective date is listed<br>days after the dated<br>REQUIRED SIG | late, if other than the ced, the date must be te of filing.)  ENATURE:  Signature of a member   | specific and cannot be more than  | five business days             |
| LE V: Effective d<br>fective date is listed<br>days after the dated<br>REQUIRED SIG | late, if other than the ced, the date must be te of filing.)  ENATURE:  Signature of a member  (In accordance with sect                                 | or an authorized representative of a maion 608.408(3), Florida Statutes, the executes an affirmation under the penalties of p | five business days             |
| LE V: Effective d<br>fective date is listed<br>days after the dated<br>REQUIRED SIG | late, if other than the ced, the date must be te of filing.)  ENATURE:  Signature of a member  (In accordance with sect of this document constitutions) | or an authorized representative of a maion 608.408(3), Florida Statutes, the executes an affirmation under the penalties of p | five business days             |

\$125.00 Filing Fee for Articles of Organization and Designation

of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)