## L050000 5252

| (Requestor's Name)                      | _               |
|---|-----------------|
|   | _               |
| (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: | 7               |
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05/23/05--01024--017 \*\*160.00

## TRANSMITTAL LETTER

TO:

Registration Section

| Division of Corp           | porations  |                 |  |  |                   |                    |
|----------------------------|--|-----------------|--|--|-------------------|--------------------|
| SUBJECT: REALEST           | ATE NOW, LLC   |                 |  |  |                   |                    |
|                            | (Name of Limited   | l Liability Con | npany)   |  |                   |                    |
| The enclosed Articles of   | Organization and fee(s) are su                                       | ıbmitted for fi | ling.  |  |                   |                    |
| Please return all correspo | ndence concerning this matte   | r to the follow | ing:   |  |                   |                    |
| EDWARD                     | CHARLES GROSS  |                 |  |  |                   |                    |
| <del>_</del>               | (P   | Vame of Person) |  |  |                   |                    |
| REALESTATE NOW             | LLC  |                 |  |  |                   |                    |
|                            |  | Firm/Company)   |  |  | <u>.</u>          |                    |
| 4100 CENTE                 | ER POINTE DRIVE  |                 |  |  |                   |                    |
| 4109 CENTE                 | ER FOINTE DRIVE  | (Address)       |  |  | _                 |                    |
| SARA                       | SOTA FL 34233  |                 |  |  | SECI              | 05 HA              |
|                            |  | State and Zip C | ode)   |  | SAH               | 7                  |
| For further information of | oncerning this matter, please  | call:           |  |  | TY OF S           | 05 MAY 23 PM 1: 06 |
| EDWARD CHARLES             | GROSS  | at ( 941        | 377.9948   |  |                   | 90:                |
| (Name                      | of Person)   |                 | Code & Daytime To  | elephone Numbe   | er)               |                    |
| Enclosed is a check for    | r the following amount:  |                 |  |  |                   |                    |
| \$125.00 Filing Fee        | ☐ \$130.00 Filing Fee & Certificate of Status                        | Certified C     | ) Filing Fee &<br>lopy<br>opy is enclosed)                     | \$160.00<br>Certificate<br>Certified C<br>(additional co | of Status<br>Copy | &                  |
| Registr<br>Divisio         | ET ADDRESS:<br>ration Section<br>on of Corporations<br>Gaines Street |                 | MAILING A<br>Registration S<br>Division of Co<br>P.O. Box 632' | ection<br>orporations                                    |                   |                    |

Tallahassee, Florida 32314

Tallahassee, Florida 32399

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

| ARTICLE I - Name: The name of the Limited Liability Compan   | y is:  |   |
|--|--|---|
| REALESTATE NOW, LLC  | -  |   |
| ARTICLE II - Address:<br>The mailing address and street address of the   | he principal office of the Limited Liab  | oility Company is:                          |
| Principal Office Address:  | Mailing Address:   |   |
| 3900 CLARK RD  | 3900 CLARK RD  |   |
| LAKESHORE VILLAGE  | LAKESHORE VILLAGE  | <del></del>                                 |
| CADAGOTA EL 24222  | ~ <u>~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ </u>  | <del></del>                                 |
| SARAOSTA FL 34233  | SARASOTA FL34233   |   |
| ARTICLE III - Registered Agent, Regist The name and the Florida street address of EDWARD CHARLES GRO   | tered Office, & Registered Agent's S   | _   |
| ARTICLE III - Registered Agent, Regist The name and the Florida street address of EDWARD CHARLES GRO   | tered Office, & Registered Agent's S   | _   |
| ARTICLE III - Registered Agent, Regist The name and the Florida street address of EDWARD CHARLES GRO   | tered Office, & Registered Agent's State the registered agent are:  OSS  Name        | 05 MAY 23 PM<br>SECRETARY OF<br>FALLAHASSEE |
| ARTICLE III - Registered Agent, Regist The name and the Florida street address of EDWARD CHARLES GRO N 4109 CENTER POINTE D                                    | tered Office, & Registered Agent's State the registered agent are:  OSS  Name        | 05 MAY 23 PM<br>SECRETARY OF<br>FALLAHASSEE |
| ARTICLE III - Registered Agent, Regist The name and the Florida street address of EDWARD CHARLES GRO N 4109 CENTER POINTE D                                    | tered Office, & Registered Agent's State the registered agent are:  OSS  Name  DRIVE | _   |
| ARTICLE III - Registered Agent, Regist The name and the Florida street address of  EDWARD CHARLES GRO N  4109 CENTER POINTE D Florida street SARASOTA FL 34233 | the registered agent are:  OSS Name  DRIVE  et address (P.O. Box NOT acceptable)     | 05 MAY 23 PM<br>SECRETARY OF<br>FALLAHASSEE |

accept the obligations of my position as registered agent as provided for in Chapter 608, F.S..

(CONTINUED)

Page 1 of 2

## ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

| Title:   | Name and Address:  |  |  |  |  |
|--|--|--|--|--|--|
| "MGR" = Manager "MGRM" = Managing Member   |  |  |  |  |  |
| MORW — Managing Member   |  |  |  |  |  |
| MGR  | EDWARD CHARLES GROSS   |  |  |  |  |
|  | 4109 CENTE POINTE DRIVE  |  |  |  |  |
|  | SARASOTA FL 34233  |  |  |  |  |
| MGRM   | BETTY C. GROSS   |  |  |  |  |
|  | 4109 CENTER POINTE DRIVE   |  |  |  |  |
|  | SARASOTA FL 34233  |  |  |  |  |
| MGRM   | TAMARA MAGNUSON  |  |  |  |  |
|  | 4237 TURTLE CREEK LAND   |  |  |  |  |
|  | SARASOTA FL 34232  |  |  |  |  |
|  |  |  |  |  |  |
| The state of the s | <u></u>  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
| (Use attachment if necessary)  |  |  |  |  |  |
| NOTE: An additional article must be  | added if an effective date is requested.   |  |  |  |  |
| DECEMBER CONT. TYPE  |  |  |  |  |  |
| REQUIRED SIGNATURE:  |  |  |  |  |  |
| $A \setminus A$  |  |  |  |  |  |
|  |  |  |  |  |  |
| Signature of a member of   | r an authorized representative of a member.  |  |  |  |  |
|  | (00 100(3) Eladd Statutes the assession  |  |  |  |  |
| of this document constitute that the facts stated here   | n 608.408(3), Florida Statutes, the execution es an affirmation under the penalties of perjury in are true.) |  |  |  |  |
| EDWARD CHARLES O   | BROSS  |  |  |  |  |
|  | or printed name of signee  |  |  |  |  |
|  |  |  |  |  |  |
| Filing Fees:   | ······································   |  |  |  |  |
| \$125.00 Filing Fee for Articles of Organiz  | ation and Designation  |  |  |  |  |

of Registered Agent
\$ 30.00 Certified Copy (Optional)

- \$ 5.00 Certificate of Status (Optional)