

CT CORPORATION SYSTEM

# L01 00000 6368

CORPORATION(S) NAME

(1) Antiquarian Fine Art Society LLC

(2) Antiquarian Fine Art Fair LLC

000004077370--7

04/25/01--01055--018

\*\*\*\*125.00 \*\*\*\*125.00

☐ Profit

☐ Amendment

☐ Merger

☐ Nonprofit

☐ Foreign

☐ Dissolution/Withdrawal

☐ Mark

☐ Reinstatement

☒ Limited Partnership

☐ Annual Report

☐ Other

☒ LLC

☐ Name Registration

☐ Change of RA

☐ Fictitious Name

☐ UCC

☐ Certified Copy

☐ Photocopies

☐ CUS

☐ Call When Ready

☐ Call If Problem

☐ After 4:30

☐ Walk In

☐ Will Wait

☒ Pick Up

☐ Mail Out

4/25/01

Order#: 4171696

Ref#:

Amount: \$

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

01 APR 25 PM 1:43

FILED

RECEIVED  
TALLAHASSEE, FLORIDA  
APR 25 2001  
NAME  
AVAILABILITY  
DOCUMENT  
EXAMINER  
UPDATER  
VERIFIER  
W.P. VERIFIER

660 East Jefferson Street  
Tallahassee, FL 32301  
Tel. 850 222 1092  
Fax 850 222 7615

A CCH LEGAL INFORMATION SERVICES COMPANY

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

## ARTICLE I - Name:

The name of the Limited Liability Company is:

Antiquarian Fine Art Fair LLC

## ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

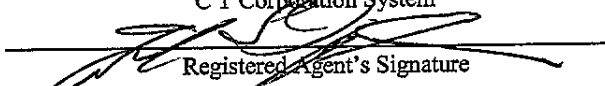
1445 Jupiter Park Drive  
Jupiter, Florida 33458

## ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

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

CT Corporation System  
Name  
c/o CT Corporation System, 1200 South Pine Island Road  
Florida street address (P.O. Box **NOT** acceptable)  
Plantation FL 33324  
City, State, and Zip

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

CT Corporation System  
  
Registered Agent's Signature

Gil S. Apellis, Asst. Secretary

## Article IV - Management (Check box if applicable.)

☐ The Limited Liability Company is to be managed by one manager or more managers and therefore, a manager - managed company.

(An additional article must be added if an effective date is requested)

Signature of a member or an authorized representative of a member.

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

Bruce Ferrini

Typed or printed name of signee

## FILING FEES:

- \$ 100.00 Filing Fee for Articles of Organization
- \$ 25.00 Designation of Registered Agent
- \$ 30.00 Certified Copy (OPTIONAL)
- \$ 5.00 Certificate of Status (OPTIONAL)

FILED  
01 APR 25 PM 1:43  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA