

L02000019797

CORPDIRECT AGENTS, INC. (formerly CCRS)
103 N. MERIDIAN STREET, LOWER LEVEL
TALLAHASSEE, FL 32301
222-1173

FILING COVER SHEET
ACCT. #FCA-14

CONTACT: Pam

DATE: 8-5-02

REF. #: 0409 8303

CORP. NAME: Gnome Investments & Advisory Services, LLC

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

02 AUG - 5 PM 2:02

FILED

- | | | |
|------------------------------------------------------|-------------------------------------------------|-------------------------------------------------------|
| <input type="checkbox"/> ARTICLES OF INCORPORATION | <input type="checkbox"/> ARTICLES OF AMENDMENT | <input type="checkbox"/> ARTICLES OF DISSOLUTION |
| <input type="checkbox"/> ANNUAL REPORT | <input type="checkbox"/> TRADEMARK/SERVICE MARK | <input type="checkbox"/> FICTITIOUS NAME |
| <input type="checkbox"/> FOREIGN QUALIFICATION | <input type="checkbox"/> LIMITED PARTNERSHIP | <input checked="" type="checkbox"/> LIMITED LIABILITY |
| <input type="checkbox"/> REINSTATEMENT | <input type="checkbox"/> MERGER | <input type="checkbox"/> WITHDRAWAL |
| <input type="checkbox"/> CERTIFICATE OF CANCELLATION | <input type="checkbox"/> UCC-1 | <input type="checkbox"/> UCC-3 |
| <input type="checkbox"/> OTHER: | | |

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-08/05/02--01030--013

****155.00 ****155.00

STATE FEES PREPAID WITH CHECK# 502877 FOR \$ 155.00

Name	
Document	LLC
Examiner	
Updater	

AUTHORIZATION FOR ACCOUNT IF TO BE DEBITED:

Updater	
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PLEASE RETURN:

- | | |
|----------------------------------------------------|-----|
| <input checked="" type="checkbox"/> KNOWLEDGEMENT | DCC |
| <input checked="" type="checkbox"/> CERTIFIED COPY | |
| <input type="checkbox"/> W. P. Verifier | DCC |
| <input type="checkbox"/> CERTIFICATE OF STATUS | |

COST LIMIT: \$

RECEIVED
02 AUG - 5 AM 10:30
TALLAHASSEE, FLORIDA
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

☐ CERTIFICATE OF GOOD STANDING

☐ PLAIN STAMPED COPY

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**ARTICLES OF ORGANIZATION
OF
GNOME INVESTMENTS & ADVISORY SERVICES, LLC**

ARTICLE I: - Name

The name of the Limited Liability Company is: **GNOME INVESTMENTS & ADVISORY SERVICES, LLC**

ARTICLE II: - Address

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

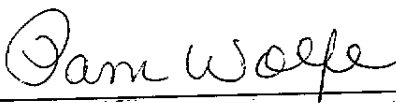
**103 N. Meridian Street, Lower Level
Tallahassee, Florida 32301**

ARTICLE III: - Registered Agent, Registered Office, and Registered Agent's Signature:
The name and the Florida street address of the registered agent are:

**CorpDirect Agents, Inc.
103 N. Meridian Street, Lower Level
Tallahassee, Florida 32301**

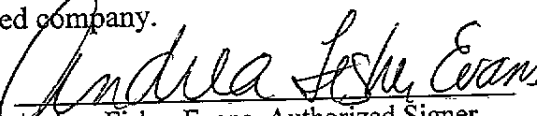
Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all 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.

CORPDIRECT AGENTS, INC.

By: 
Name:

ARTICLE IV: - Management

☒ The Limited Liability Company is to be managed by one Member or more Members and is, therefore, a member - managed company.

By: 
Andrea Fisher Evans, Authorized Signer

(In accordance with section §608(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

Andrea Fisher Evans
Typed or printed name of signee

02 AUG -5 PM 2:08
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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