

# L03000031407

Florida Department of State  
Division of Corporations  
Public Access System

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H03000258660 7)))

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations  
Fax Number : (850) 205-0383

From:

Account Name : NATIONAL CORPORATE RESEARCH, LTD.  
Account Number : I200000000000  
Phone : (800) 221-0102  
Fax Number : (212) 564-6083

LIMITED LIABILITY COMPANY

GO REALTY GROUP FLA LLC

Certificate of Status	0
Certified Copy	1
Page Count	01
Estimated Charge	\$155.00

**ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY**

**ARTICLE I - Name:**

The name of the Limited Liability Company is:

GO Realty Group Fla LLC

**ARTICLE II - Address:**

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

1340 South Ocean Blvd., Suite 1605

1340 South Ocean Blvd., Suite 1605

Pompano Beach

FL

33062

Pompano Beach

FL

33062

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

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

National Corporate Research, Ltd., Inc.

Name

103 N. Meridian Street

Florida street address (P.O. Box NOT acceptable)

Tallahassee

FL

32301

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.*



Registered Agent's Signature

Colleen A. DeVries

Asst. V.P.

Print Name & Title

(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.)

Allen Kahan

Typed or printed name of signer

**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)

03 AUG 21 PM 4:05  
FILED  
AUG 21 2003  
TALLAHASSEE, FL  
CLERK OF CIRCUIT COURT