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## TRANSMITTAL LETTER

	ion Section of Corporations		
SUBJECT:G	Set Real Investors, LLC	aile d Lightlift Commun	
	(Name of Lin	nited Liability Compar	19)
The enclosed A	rticles of Organization ar	nd fee(s) are submitte	ed for filing.
Please return al	l correspondence conce	rning this matter to th	e follow:
	Doug	Carter	
		of Person)	一一
			F. 2
	Get Real Investors, LLC.		
	Vanna 4)	ompany)	
	4424 N	N. Lois Ave.	
		dress)	플레
	Tampa	FL 33614	7
<u></u>		and Zip Code)	<del></del>
For further infor	mation concerning this m	natter, please call:	
Doug Ca	arter	at (813) 870-2966	
(Name of F	'erson)	(Area Code & Day	ytime Telephone number)
Enclosed is a ch	neck for the following am	ount:	/
□\$125.00 File Fee	□\$130.00 Filing Fee & Certificate of Status	□\$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	15160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Registrat Division of 409 E. G	ADDRESS: ion Section of Corporations aines Street see, FL 32399	Registr Division P.O. Bo	NG ADRESS: ration Section of Corporations ox 6327 assee, FL 32314

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY ARTICLE I – Name: The name of the Limited Liability Company is: Get Real Investors, LLC ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability company is: Mailing Address: Principal Office Address: Get Real Investors, LLC. 4424 N. Lois Avenue 4424 N. Lois Avenue Tampa., FL 33614 Tampa, FL 33614 ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: The name and the Florida street address of the registered agent are: Doug Carter

Having been named as registered agent and to accept service of process for the above stated limited liability company at a 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 Chapter 608, F.S..

4424 N. Lois Avenue Name

> Tampa, FL 33609 City, State and Zip

> > Registered Agent's Signature

(CONTINUED)

## 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	Mamber
MGRM	Doug Carter  836 S. Bayside Drive  Tampa, FL 33609
<u>MGRM</u>	Sean Kearney  225 Lagoon Drive  Palm Harbor, FL 34683
<u>Member</u>	Michelle Domingo  1920 149 <sup>th</sup> Street, N.E.  Woodinville, Washington 98077
ARTICLE V Effect	tive Date
The effective date of	the LLC shall be May 15, 2005.
REQUIRED SIGNAT	Da a
	Obug Carter- Managing 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.)
	Doug Carter, Managing Member Typed or printed name of signee