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SECRETARY OF STATE
ALLAHASSEF, FIGRIDA

COVER LETTER

TO: Registration Section Division of Corporation					
SUBJECT: GFI Crea	ative Designs, LL				
	(Name of Limited	d Liability Cor	npany)		
The enclosed Articles of Or	ganization and fee(s) are s	ubmitted for fi	ling.		
Please return all correspond	lence concerning this matte	er to the follow	ing:		
Michael A. I		., .,			
	0	Name of Person)		
GFI Creative	e Designs, LLC				
	(Firm/Company)			
6155 Ray (Court				
		(Address)	***		
Lantana, F					
	(City/	State and Zip C	ode)		
For further information con	cerning this matter, please	call:		·	
Michael A. Izzaro	ne	at (561	909-76		
(Name of I	'erson)	(Area C	Code & Daytime To	elephone Number) 岩台	
Enclosed is a check for the	ne following amount:				# Palema d
] \$130.00 Filing Fee & Certificate of Status	Certified C	Filing Fee & opy py is enclosed)	S160.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)	
Ā E P	Mailing Address Registration Section Division of Corporations P.O. Box 6327 Fallahassee, FL 32314	Regist Divisi Cliftor 2661 I	/Courier Address ration Section on of Corporation in Building Executive Center assee, FL 32301	ns	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:		
The name of the Limited Liability Compa	any is:	
GFI Creative Designs, LLC		
(Must end with the words "Limited Liability Company	, "Limited Company" or their abbreviation "LLC	," or "L.C.,")
ARTICLE II - Address:		
The mailing address and street address of	the principal office of the Limited Li	iability Company is:
Principal Office Address:	Mailing Address:	
6155 Ray Court	Same	
Lantana, FL 33462		
ARTICLE III - Registered Agent, Registre Limited Liability Company cannot serve as its own business entity with an active Florida registration.)		
The name and the Florida street address of	of the registered agent are:	O6 JUL I SECRETA TALLAHAS
Michael A. Izzarone		
	Name	V. 7.
6155 Ray Court		SEE OF 2 M
Florida st	reet address (P.O. Box NOT acceptable)	
Lantana	FL 33462	AH 10: 45 OF STATE FLORIDA
City,	State, and Zip	E DA

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 (REQUIRED)

(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:

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:			
MGRM	Michael A. Izzarone			
	6155 Ray Court		-	
	Lantana, FL 33462		<u>-</u> -	
			-	
			_	
			-	
			<u>-</u>	
-			-	
			- -	
(Use attachment if necessary)				
ARTICLE V: Effective date, if other than the da	ate of filing:	(OPTIC)NAL	<i>.</i>)
(If an effective date is listed, the date must be s				
to or 90 days after the date of filing.)		$\Sigma_{\rm S}$	0	
		-L/A	r 90	
REQUIRED SIGNATURE:		が行	F	and the same of the
		355		Estation Cartesian estationers
mill.		ini [©]	3	1 1 1
Signature of a presider of	or an authorized representative of a member	. C.S.	=======================================	-
		22	ŧ.	The same of
(In accordance with section of this document constitute that the facts stated here	tes an affirmation under the penalties of perjury	DA .	(J)	
Michael A. Izzarone				
Турес	d or printed name of signee			

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)