

L07000065747

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

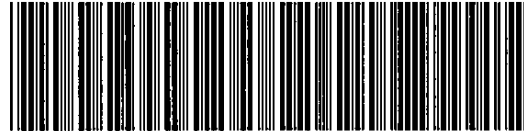
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07 JUN 22 PM 3:11  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
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07 JUN 22 PM 12:44  
DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

CORPDIRECT AGENTS, INC. (formerly CCRS)  
515 EAST PARK AVENUE  
TALLAHASSEE, FL 32301  
222-1173

FILING COVER SHEET  
ACCT. #FCA-14

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TALLAHASSEE, FLORIDA

CONTACT: NICHOLE STONE

DATE: 06/22/07

REF. #: 000169.70438

CORP. NAME: GO ARTSY, LLC

- |  |   |   |
|--|---|---|
| <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"/> OTHER:                      |   |   |

STATE FEES PREPAID WITH CHECK# \_\_\_\_\_ FOR \$ 155.00

AUTHORIZATION FOR ACCOUNT IF TO BE DEBITED:

\_\_\_\_\_ COST LIMIT: \$ \_\_\_\_\_

PLEASE RETURN:

- |  |   |   |
|--|---|---|
| <input checked="" type="checkbox"/> CERTIFIED COPY | <input type="checkbox"/> CERTIFICATE OF GOOD STANDING | <input type="checkbox"/> PLAIN STAMPED COPY |
| <input type="checkbox"/> CERTIFICATE OF STATUS     |   |   |

Examiner's Initials

**ARTICLES OF ORGANIZATION  
OF  
GO ARTSY, LLC**

**FILED**  
07 JUN 22 PM 3:11  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

The undersigned, pursuant to the provisions of Chapter 608 of the Florida Statutes for the purpose of forming a limited liability company, under the laws of the State of Florida, do hereby set forth the following:

**ARTICLE I  
NAME**

The name of the limited liability company is: **GO ARTSY, LLC**

**ARTICLE II  
PERIOD OF DURATION**

The period of duration of the limited liability company shall be from the date of filing these Articles of Organization until the dissolution of the limited liability company pursuant to provisions of the Florida Limited Liability Company Act.

**ARTICLE III  
PURPOSE**

The purpose for which the limited liability company is organized is to engage in the purchase, sale, rental, and mortgage and all other business and activities permitted by the laws of the State of Florida. The limited liability company shall have all of the powers vested in a limited liability company organized and existing by virtue of such laws.

**ARTICLE IV**  
**ADDRESS OF PLACE OF BUSINESS**

The mailing address, and the place of business in Florida, is 811 Tyler Street,  
Hollywood, FL 33019.

**ARTICLE V**  
**REGISTERED AGENT**

The name and address of the initial registered agent in Florida of the limited liability  
company is Bruce M. Gottlieb, Esq., 125 North 46th Avenue, Hollywood, FL 33021.

**ARTICLE VI**  
**ADDITIONAL CONTRIBUTIONS**

The total additional contributions, if any, agreed to be made by all members and the  
times at which, or the events happening of which, that shall be made are as follows: No  
total additional contributions have been agreed to at the date of filing these Articles of  
Organization. Additional contributions, if any, will be made upon unanimous agreement by  
all of the members of the limited liability company, and in accord with Chapter 608 Florida  
Statutes.

**ARTICLE VII**  
**MEMBERS**

The initial member of the Organization is:

NINETTE KATSOULOS

100%

Members may admit additional members upon unanimous agreement of the then  
existing members.

**ARTICLE VIII**  
**CONTINUITY OF BUSINESS**

Upon the death, retirement, resignation, expulsion, bankruptcy or dissolution of a member or the occurrence of any other event which terminates the continued membership of a member in the limited liability company, the business of the limited liability company shall not be continued and the limited liability company shall be dissolved unless there is obtained the consent of all the remaining members of the limited liability company.

**ARTICLE IX**  
**MANAGEMENT**

The limited liability company is to be managed by its manager. The name and address of the initial manager of the limited liability company is as follows:

**NAME:**

NINETTE KATSOULOS


**ADDRESS:**

811 Tyler Street  
Hollywood, FL 33019

The initial manager shall serve until their successor is elected and qualifies.

I AM HEREBY FAMILIAR WITH AND ACCEPT THE DUTIES  
AND RESPONSIBILITIES AS REGISTERED AGENT FOR SAID  
CORPORATION.

EXECUTED at Hollywood, Florida, on June 21st, 2007.

  
\_\_\_\_\_  
BRUCE M. GOTTLIEB  
Authorized Representative/  
Registered Agent

STATE OF FLORIDA

COUNTY OF BROWARD

The foregoing Articles of Organization were acknowledged before me on

June 21st, 2007, by BRUCE M. GOTTLIEB, as Authorized

Representative/Registered Agent of GO ARTSY, LLC a Limited Liability Company to be

formed, who is personally known to me or who has produced his N/A

as identification and who did take an oath.

NOTARY PUBLIC:

Sign: Leslie Beth Cooper

Print: Leslie Beth Cooper

My Commission Expires:

