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2011 JUL 19 PH 與20 SECRETARY OF STATE.

C. LEWIS

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EXAMINER



240 Pineapple Avenue, Suite 700 Sarasota, FL 34236 Phone: 941-906-1231 Fax: 941-954-1185 www.bachjacobs.com

July 15, 2011

Registration Section Division of Corporations P. O. Box 6327 Tallahassee, FL 323314

Re: Modern Gypsies, LLC

Dear Sir or Madam:

Enclosed please find original and one copy of the Cover Letter and Articles of Organization for Florida Limited Liability Company for Modern Gypsies, LLC. Also enclosed is check #5364 in the amount of \$125.00 payable to Division of Corporation for the filing fee.

Please file the Articles and stamp the copy of the Articles and return the copy to my office as soon as possible in the self addressed stamped envelope enclosed for your convenience.

If you have any questions or require any additional information or documentation, please do not hesitate to contact me.

Sincerely,

Fredric C. Jacobs

FCJ:lkm Enclosures

cc: Ben Karp, w/copy of enclosures, via email

COVER LETTER

| то: | Registration Division of C | | | |
|---------------------|-------------------------------|---|--|--|
| SUBJ | _{ECT:} Mode | ern Gypsies, LLC | | |
| 2020 | | | ed Liability Company | |
| The en | closed Articles | of Organization and fee(s) are | submitted for filing. | |
| Please | return all corres | pondence concerning this mat | ter to the following: | |
| , | Fredric C | C. Jacobs, Esq. | | |
| | | | Name of Person | |
| | Bach & J | acobs, P.A. | | |
| | | | Firm/Company | |
| | 240 Pine | apple Avenue, Su | ite 700 | |
| | | | Address | |
| | Sarasota, | FL 34236 | | |
| | | | y/State and Zip Code | |
| | lesli@saras | sotaelderlaw.com E-mail address: (to be used to | for future annual report notification) | |
| For fur | ther information | concerning this matter, please | e call: | |
| Fred | ric C. Jacob | • | at (941) 906-1231 | |
| | Name | of Person | Area Code & Daytime Telepho | one Number |
| Enclos | sed is a check for | or the following amount: | | |
| [/]\$125.00 | Filing Fee | \$130.00 Filing Fee & Certificate of Status | Certified Copy (additional copy is enclosed) | \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed) |
| | 1 | Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 | Street/Courier Address Registration Section Division of Corporations Clifton Building 2661 Executive Center Circ Tallahassee, FL 32301 | :le |

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

| ARTICLE I - Name | Α | RT | ICI | E I | [_ N | Name | |
|------------------|---|----|-----|-----|-------|------|--|
|------------------|---|----|-----|-----|-------|------|--|

The name of the Limited Liability Company is:

Modern Gypsies, LLC

(Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")

ARTICLE II - Address:

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

Principal Office Address:

Mailing Address:

c/o Bach & Jacobs, P.A. 240 Pineapple Avenue, Suite 700

Sarasota, FL 34236

c/o Bach & Jacobs, P.A.
240 Pineapple Avenue, Suite 700
Sarasota, FL 34236

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

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

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

Benjamin I. Karp

Name

240 Pineapple Avenue, #700

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

Sarasota

ր 34236

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 (REQUIRED)

(CONTINUED)

Page 1 of 2

FILED

ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

2011 JUL 19 PK # 20

| MGRM | Benjamin I. Karp | |
|---|---------------------------------|--------------|
| | 240 Pineapple Avenue, Suite 700 | <u> </u> |
| | Sarasota, FL 34236 | <u> </u> |
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| LE V: Effective date, if other than the | e date of filing: (O | PTIONAL) |
| E V: Effective date, if other than the | e date of filing: (O | PTIONAL) |

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. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)

Benjamin I. Karp

Typed or printed name of signee

Filing Fees:

Î

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)