

L11 0000 94814

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

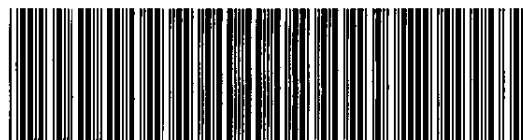
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



800211662128

09/06/11--01014--002 **25.00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2011 SEP - 6 PM 11:09

FILED

T. CLINE

SEP - 7 2011

EXAMINER

L11-94814

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: GOSOUTH, LLC
Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Articles of Correction and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

STEVEN C KLEIN

Name of Person

STEVEN C KLEIN CPA PA

Firm/Company

11776 W SAMPLE RD # 105

Address

CORAL SPRINGS, FL 33065

City/State and Zip Code

gita@skleincpa.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

gita klein

Name of Person

at (954)

345-3696

Area Code & Daytime Telephone Number

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

Enclosed is a check for the following amount:

- ☒ \$25 Filing Fee ☐ \$30 Filing Fee & Certificate of Status ☐ \$55 Filing Fee & Certified Copy ☐ \$60 Filing Fee, Certificate of Status & Certified Copy

CR2E062 (08/05)

FILED
2011 SEP -6 AM 11:09
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

411000206108
ARTICLES OF ORGANIZATION
OF
GOSOUTH, LLC

ARTICLE ONE
NAME

The name of this Limited Liabilities Company shall be
GOSOUTH, LLC.

ARTICLE TWO
ADDRESS

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

3610 YACHT CLUB DRIVE SUITE 1408
AVENTURA, FL 33180

ARTICLE THREE
REGISTERED AGENT, Registered office and Registered Agent's
Signature

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

Steven C. Klein
11776 W. Sample Road
Suite 105
Coral Springs, Florida 33065.

Having been named as registered agent to accept service of process
for the above stated limited liability company at the place
designated in this certificate, we hereby accept the appointment as
registered agent and agree to act in this capacity. We further
agree to comply with the provisions of all statutes relating to the
proper and complete performance of our duties, and we are familiar
with and accept the obligations of our position as registered agent
as provided for in Chapter 608, F.S.

Registered Agent

Steven C Klein

Prepared by Steven C. Klein, CPA
11776 W. Sample Rd # 105 Coral Springs, FL 33065

411000206108

11 AUG 17 AM 0:00
SECRETARY OF STATE
ALL INFORMATION CONTAINED
HEREIN IS UNCLASSIFIED

FILED

H11000206108

ARTICLES

PAGE 2

ARTICLE FOUR
MEMBERS

The member of this Limited Liability Company is:

1. MARCOS IBERKLEID

ARTICLE FIVE
MANAGEMENT

The Limited Liability Company is to be managed by one or more members and is therefore a member-managed company.


STEVEN C KLEIN

Authorized Representative of Member

FILED
11 AUG 17 AM 9:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

(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.)


STEVEN C KLEIN

Authorized Representative of Member

H11000206108