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(Re	equestor's Name)			
(Ad	ldress)			
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PICK-UP	TIAW-	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	_ Certificates	s of Status		
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Effective Date 2-14-13

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2013 FEB 20 AM 9: 15

SECRETARY OF STATE.

J. SAULSBERRY EXAMINER

FEB 2 2 2013

COVER LETTER

TO: Registration S Division of Co			
SUBJECT: 6	0- Flaunt LI	LC.	
	Name of Limit	ed Liability Company	
The enclosed Articles of	of Organization and fee(s) are	submitted for filing.	
Please return all corresp	oondence concerning this matt	er to the following:	
T:	mothy Courtm	z Y	
		Name of Person	<u> </u>
			20
-		Firm/Company	<u> </u>
	8791 Holly	Count #203	DIBFEB 20
		Address	
	Tamanac El	33321	B 20 AM 9: :5 IARY OF STATE ASSEE. FLORIO
	Tamange FL Cit	y/State and Zip Code	§
	M7 Kendall (or future annual report notification)	
For further information	concerning this matter, please	call:	
Tinothy Co	urtney	at (954) 608 - S Area Code & Daytime Telep	7778
Name	of Person	Area Code & Daytime Telep	hone Number
Enclosed is a check for	or the following amount:		
,	□\$130.00 Filing Fee & Certificate of Status	□\$155.00 Filing Fee & □ Certified Copy (additional copy is enclosed)	\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	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 Ci Tallahassee, FL 32301	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:
The name of the islantica islantity company to.
GO-FLAUNT 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:
8791 HOLLY COURT #203 8791 HOLLY COURT #203 TANGRAC FL 33321 TANGRAC FL 33321
12 A A A C PL 33321
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: The name and the Florida street address of the registered agent are: The name and the Florida street address of the registered agent are: The name and the Florida street address of the registered agent are: The name and the Florida street address of the registered agent are: The name and the Florida street address of the registered agent are: The name and the Florida street address of the registered agent are: The name and the Florida street address of the registered agent are: The name and the Florida street address of the registered agent are: The name and the Florida street address of the registered agent are: The name and the Florida street address of the registered agent are: The name and the Florida street address of the registered agent are: The name and the Florida street address of the registered agent are: The name and the Florida street address of the registered agent are: The name and the Florida street address of the registered agent are: The name and the Florida street address of the registered agent are: The name and the Florida street address of the registered agent are: The name and the Florida street address of the registered agent are: The name and the Florida street address of the registered agent are: The name and the Florida street address of the registered agent are: The name and the Florida street address of the registered agent are: The name and the Florida street address of the registered agent are: The name and the Florida street address of the registered agent are: The name and the Florida street address of the registered agent are: The name and the Florida street address of the registered agent are: The name and

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:

Title:	Name and Address:			
"MGR" = Manager "MGRM" = Managing Member				
MGRH	Tinothy Courtmy 8791 HOLLY COURT # 203 Tangrac FC 33321			
MGRM	Duntel Potvin 3952 tracewood Lane Botton Bench FL 33436			
MGRN	Gonzalo Del Castillo 9224 Rutledge Ave Boxa Raton FC 33434			
MGRH	John Richters 420 Kanuga Prive APt. 1 West Pain Beach FC 33401			
(Use attachment if necessary)				
	ate of filing: $\frac{2/14/13}{}$. (OPTIONAL)			
(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.) $\Rightarrow_{ca} \Rightarrow$				
REQUIRED SIGNATURE:	ZUI3FEB 20 AM 9:			
Signature of a member o	r an authorized representative of a member.			
constitutes an affirmation under the I am aware that any false informati constitutes a third degree felony as	08(3), Florida Statutes, the execution of this document e penalties of perjury that the facts stated herein are true. ion submitted in a document to the Department of State provided for in s.817.155, F.S.)			
Timothy Courtney Typed or printed name of signee				
Typed of printed name of orginee				

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)