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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

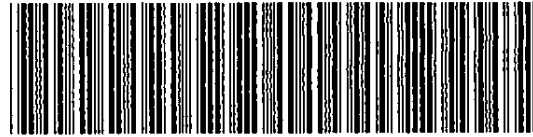
(Business Entity Name)

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14 MAR 13 AM 12:07

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

MAR 14 2014

T. BROWN

## CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301  
(850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

FIGOTA CAPITAL, LLC.

Signature \_\_\_\_\_

Requested by: Seth

03/13/14

Name \_\_\_\_\_

Date \_\_\_\_\_

Time \_\_\_\_\_

Walk-In \_\_\_\_\_

Will Pick Up \_\_\_\_\_

\_\_\_\_\_ Art of Inc. File \_\_\_\_\_

\_\_\_\_\_ LTD Partnership File \_\_\_\_\_

\_\_\_\_\_ Foreign Corp. File \_\_\_\_\_

\_\_\_\_\_ L.C. File \_\_\_\_\_

\_\_\_\_\_ Fictitious Name File \_\_\_\_\_

\_\_\_\_\_ Trade/Service Mark \_\_\_\_\_

\_\_\_\_\_ Merger File \_\_\_\_\_

\_\_\_\_\_ Art. of Amend. File \_\_\_\_\_

\_\_\_\_\_ RA Resignation \_\_\_\_\_

\_\_\_\_\_ Dissolution / Withdrawal \_\_\_\_\_

\_\_\_\_\_ Annual Report / Reinstatement \_\_\_\_\_

\_\_\_\_\_ Cert. Copy \_\_\_\_\_

\_\_\_\_\_ Photo Copy \_\_\_\_\_

\_\_\_\_\_ Certificate of Good Standing \_\_\_\_\_

\_\_\_\_\_ Certificate of Status \_\_\_\_\_

\_\_\_\_\_ Certificate of Fictitious Name \_\_\_\_\_

\_\_\_\_\_ Corp Record Search \_\_\_\_\_

\_\_\_\_\_ Officer Search \_\_\_\_\_

\_\_\_\_\_ Fictitious Search \_\_\_\_\_

\_\_\_\_\_ Fictitious Owner Search \_\_\_\_\_

\_\_\_\_\_ Vehicle Search \_\_\_\_\_

\_\_\_\_\_ Driving Record \_\_\_\_\_

\_\_\_\_\_ UCC 1 or 3 File \_\_\_\_\_

\_\_\_\_\_ UCC 11 Search \_\_\_\_\_

\_\_\_\_\_ UCC 11 Retrieval \_\_\_\_\_

\_\_\_\_\_ Courier \_\_\_\_\_

**ARTICLES OF ORGANIZATION  
OF**

**FIGOTA CAPITAL, LLC**

**ARTICLE I  
NAME**

The name of this limited liability company is **FIGOTA CAPITAL, LLC**.

**ARTICLE II  
DURATION**

This limited liability company shall have perpetual existence.

**ARTICLE III  
PURPOSE**

This limited liability company is organized for any lawful purpose, except that special statutes for the regulation and control of specific types of business shall control when in conflict with these Articles of Organization.

**ARTICLE IV  
ADDRESS**

The principal place of business and mailing address of this limited liability company shall be **5355 Town Center Road, Suite 801, Boca Raton, Florida 33486**.

**ARTICLE V  
INITIAL REGISTERED AGENT AND OFFICE**

The initial registered agent of this limited liability company is **Keith A. Goldbaum**, and the initial registered agent's office address shall be **5355 Town Center Road, Suite 801, Boca Raton, Florida 33486**.

**ARTICLE VI  
MANAGEMENT**

This limited liability company shall be managed one or more managers. The name and address of the initial managers are:

Keith A. Goldbaum	5355 Town Center Road, Suite 801 Boca Raton, Florida 33486
Arlen Fischlowitz	4305 NW 24th Avenue Boca Raton, Florida 33434
Joe D. Seta	911 E. Atlantic Blvd., #101 Pompano Beach, Florida 33060

**ARTICLE VII  
POWERS**

This limited liability company shall have all of the powers enumerated in the Limited Liability Act.

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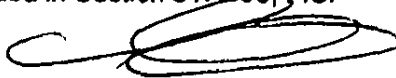
**ARTICLE VIII**  
**RIGHT OF CONTINUANCE**

The members shall have the right to continue the business on the death, retirement, resignation, expulsion, bankruptcy, or dissolution of a member or the occurrence of any other event that terminates the continued membership of a member in the limited liability company.

**ARTICLE IX**  
**AMENDMENT**

These Articles of Organization may be amended in the manner provided in the Operating Agreement of the Company.

IN WITNESS WHEREOF, an authorized representative of a member of the limited liability company has executed these Articles of Organization on the 12 day of March, 2014, and in accordance with Section 805.0203(1)(b), 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 in Section 817.155, F.S.



\_\_\_\_\_  
Keith A. Goldbaum  
authorized representative of a Member

**CERTIFICATE OF DESIGNATION OF  
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF CHAPTER 605 OF THE FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the limited liability company is:

**FIGOTA CAPITAL, LLC**

2. The name and address of the registered agent and office is:

Keith A. Goldbaum  
5355 Town Center Road, Suite 801  
Boca Raton, Florida 33486

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 605, F.S.

  
\_\_\_\_\_  
Keith A. Goldbaum

Date: March 12, 2014