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SECRETARY OF STATE ALLAHASSEE FLORIDA

AUG 2 5 2015

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COVER LETTER

10.	Division of Corporations
	GATSBY INVESTMENTS LLC
SUBJE	CCT:Name of Limited Liability Company
The end	closed Articles of Organization and fee(s) are submitted for filing.
Please	return all correspondence concerning this matter to the following:
	PEARLY MIRON
	Name of Person
	C/O GATSBY INVESTMENTS LLC
	Firm/Company
	3410 GALT OCEAN DRIVE, APT 1602
	Address
	FORT LAUDERDALE, FL 33308
	City/State and Zip Code
	Pearly.Miron@gmail.com
	E-mail address: (to be used for future annual report notification)
For furth	er information concerning this matter, please call:
	PEARLY MIRON 954 537-4031
	Name of Person Area Code Daytime Telephone Number
Enclose	ed is a check for the following amount:
\$125.0	© Filing Fee \$\frac{1}{2}\$130.00 Filing Fee \$\frac{1}{2}\$ Certificate of Status \$\frac{1}{2}\$ (additional copy is enclosed) \$\frac{1}{2}\$ \$\fr
	Mailing AddressStreet AddressNew Filing SectionNew Filing Section
	Division of Corporations P.O. Box 6327 Division of Corporations Clifton Building
	P.O. Box 6327 Clifton Building Tallahassee, FL 32314 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ART	LICI	F L	- Na	me

The name of the Limited Liability Company is:

GATSBY INVESTMENTS 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:
3410 GALT OCEAN DRIVE	3410 GALT OCEAN DRIVE
APT 1602	APT 1602
FORT LAUDERDALE, FL 33308	FORT LAUDERDALE, FL 33308

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:

PEARLY	MIRON	
Na	ime	
3410 GALT OCI	EAN DRIVE A	PT 1602
Florida street address (P.	O. Box <u>NOT</u> a	cceptable)
FORT LAUDERDALE	FL	33308
City	State	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 605, F.S..

Registered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

<u>Title:</u>		Name and Address:
-	Authorized Member	
"MGR" = M	anager	DICHARDINA
AMBR		RICHARD URIA
		25203 WOODSIDE LANE
		BEACHWOOD, OH 44122
AMBR		BEVERLEY URIA
AMDK		25203 WOODSIDE LANE
		BEACHWOOD, OH 44122
		DD110111100D, 011 11122
MGR		YARIV MIRON
		4140 N 45TH AVE
		HOLLYWOOD, FL 33021
		riomer would result by the second
E V: Effecti	nent if necessary) we date, if other than the date is listed, the date must be sp	e of filing:
EV: Effective date is of filing.) the date insement's effect	ve date, if other than the date listed, the date must be sp	pecific and cannot be more than five business days prior to or 90 comments and cannot be more than five business days prior to or 90 comments.
E V: Effective date is of filing.) the date inscended in the content of the conte	ve date, if other than the date listed, the date must be spected in this block does not ive date on the Department	pecific and cannot be more than five business days prior to or 90 comments and cannot be more than five business days prior to or 90 comments.
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E V: Effective date is of filing.) the date inscended in the content of the conte	ve date, if other than the date ilisted, the date must be spected in this block does not give date on the Department provisions, if any. Signature of a magnetic transcription of the constitutes an affirmatic I am aware that any fals	ember or an authorized representative of a member. tion 605.0203 (1) (b), Florida Statutes, the execution of this document and under the penalties of perjury that the facts stated herein are true, e information submitted in a document to the Department of State

ARTICLE IV-

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

\$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)