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(Re	equestor's Name)	
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(Cit	y/State/Zip/Phone	·#)
PICK-UP		MAIL
(Bu	siness Entity Nam	e)
(Dc	cument Number)	
Certified Copies	_ Certificates	of Status
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10/14/05--01050--022 **125.00

SECRETARY OF STATE DIVISION OF CORPORATION: 05 OCT 14 AM11: 29

COVER LETTER

TO: Registration Section Division of Corporations

SUBJECT: GO TECHNOLOGIES LLC

(Name of Limited Liability Company)

The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida.

Please return all correspondence concerning this matter to the following:

FACUNDO GIACOBBE (Name of Person) GO TECHNOLOGIES LLC (Firm/Company) 1249 NW 38TH. PLACE (Address) CAPE CORAL, FL. 33993 (City/State and Zip Code) For further information concerning this matter, please call: GEORGE MEDINA (Area Code & Daytime Telephone Number)

MAILING ADDRFSS: Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 STREET ADDRESS: Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Enclosed is a check for the following amount:

☑\$125.00 Filing Fee □\$130.00 Filing Fee & □\$155.00 Filing Fee & □\$160.00 Filing Fee, Certificate Certificate of Status Certified Copy of Status & Certified Copy

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. GO TECHNOLOGIES LLC	
(Name of Foreign Limited Liability Company)	<u> </u>
2. NEW JERSEY (Jurisdiction under the law of which foreign limited liability company is organized) 3. 20-0235125 (FEI number, if applicable)	·
4. <u>09/16/03</u> (Date of Organization) 5. <u>INDEFINITE</u> (Duration: Year limited liability company will cease to exist or "perpetual")	.
6. <u>10/15/05</u> (Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)	DIVISIO
7. <u>1249 NW 38TH. PLACE</u>	ORETA
CAPE CORAL, FL. 33993	RYOF
(Street Address of Principal Office)	OR ST
CAPE CORAL, FL. 33993 (Street Address of Principal Office) 8. If limited liability company is a manager-managed company, check here	ATIONS
9. The name and usual business addresses of the managing members or managers are as follows:	
FACUNDO GIACOBBE 1249 NW 38TH. PLACE CAPE CORAL FL. 33993	. <u>.</u> • •
CHERYL GIACOBBE 1249 NW 38TH. PLACE CAPE CORAL FL. 33993	· · · · · · · · · · · · · · · · · · ·
10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of record the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted.)	rds in
11. Nature of business or purposes to be conducted or promoted in Florida: HOME NETWORK,	· · · · · · · · · · · · · · · · · · ·
HOME THEATER INSTALLATIONS & COMPUTER SERVICE CALLS	1 ∳ ▼ 1
Dellarde	
Signature of a member or an authorized representative of a member. (In accordance with section 608.408(3), F.S., the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)	* <u>-</u>

Typed or printed name of signee

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

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The name of the Limited Liability Company is:

GO TECHNOLOGIES LLC

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

GM ACCOUNTIN	G SERVICES LLC	
(Name)		05
8830 NW 75TH. CT.		OCT
Florida Street Address (P.O. Box NOT ACCEPTABLE)		F STE
TAMARAC,	FL 33321	AH II:
City/State/Zip		Ng am

3

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, Florida Statutes.

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- \$ 100.00 Filing Fee for Application
- Designation of Registered Agent S 25.00
- Certified Copy (optional) \$ 30.00
- **Certificate of Status (optional)** 5.00\$



GO TECHNOLOGIES LLC 0400038473

I, the Treasurer of the State of New Jersey, do hereby certify that the above-named New Jersey Domestic Limited Liability Company was registered by this office on September 16, 2003.

As of the date of this certificate, said business continues as an active business in the State of New Jersey. Annual Reports are outstanding for the following year(s): 2004

I further certify that the registered agent and registered office are:

James J. Gluck, Esq. Gluck & Allen, Llc 217 Washington St. Toms River, NJ 08753

Continued on next page . . .

