M0700004041

(Re	questor's Name)			
(Ad	dress)			
(Ad	dress)			
(Cit	y/State/Zip/Phon	e #)		
PICK-UP	☐ WAIT	MAIL		
(Bu	siness Entity Nar	ne)		
(Document Number)				
Certified Copies	_ Certificates	s of Status		
Special Instructions to I	Filing Officer:			

Office Use Only



000105095450

07/05/07--01047--011 **155.00

FILED

O7 JUL -5 PM 2: 11

SECRETARY OF STATE
TALL AHASSEE, FLORID



BOVAY, COOK & OSSI, P.A.

ATTORNEYS AT LAW
901 N.W. 57th Street
Gainesville, Florida 32605

JOHN C. BOVAY**

LL.M. IN TAXATION

ALSO ADMITTED IN DISTRICT OF COLUMBIA

JULIA M. COOK

LL.M. IN TAXATION

SUSAN M. OSSI

LL.M. IN TAXATION

ALSO ADMITTED IN ILLINOIS AND MISSOURI

SRINIVAS R. DANTULURI

LL.M. IN TAXATION

*BOARD CERTIFIED IN TAX LAW

BOARD CERTIFIED IN WILLS, TRUSTS & ESTATES LAW

TELEPHONE 352-331-9092
FACSIMILE 352-331-6895
www.bcolawfirm.com
jack@bcolawfirm.com
julie@bcolawfirm.com
susan@bcolawfirm.com
srin@bcolawfirm.com

July 3, 2007

Registration Section Division of Corporations Post Office Box 6327 Tallahassee, FL 32314

Re:

Registering foreign LLC Artsy Abode at Deltona, LLC

Gentlemen:

Pursuant to your instructions to register a foreign limited liability company to transact business in Florida, enclosed please find the following;

Artsy Abode at Deltona, LLC – cover letter, Application, Certificate of Designation of Registered Agent/Registered Office, Certificate of Good Standing, and our firm check in the amount of \$155.00.

Please be advised that according to their website (<u>www.state.de.us/corp</u>) the State of Delaware no longer uses a raised seal in their certifications as of July 1, 2006.

Please forward your letter of acknowledgement and certified copy to me at your earliest convenience.

Please do not hesitate to contact my office if you have any questions.

Sincerely,

BOVAY, COOK & OSSI, P.A.

John C.

la

enclosures

cc: Robert Lytle

COVER LETTER

_	stration Section sion of Corporations					
SUBJECT:	ARTSY ABODE AT DELTONA,	LLC				
	(Name of L	imited Liability Company)				
Florida," Ce		Liability Company for Authorization to Transact Business in submitted to register the above referenced foreign limited				
Please return	n all correspondence concerning this	s matter to the following:				
	JOHN C. BOVAY, ESQUIRE					
	(Name of Person)				
	BOVAY, COOK & OSSI, P.A.					
	((Firm/Company)				
	901 N.W. 57th STREET					
		(Address)				
	GAINESVILLE, FLORIDA 3260	5				
	(City	/State and Zip Code)				
For further i	information concerning this matter,	please call:				
JO	HN C. BOVAY	at (352) 331-9092				
 -	(Name of Person)	(Area Code & Daytime Telephone Number)				
Divi P.O.	ILING ADDRESS: sion of Corporations Box 6327 ahassee, FL 32314	STREET ADDRESS: Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301				
	a check for the following amount: 25.00 Filing Fee \$\square\$	e & XX \$155.00 Filing Fee & \$\Boxed{1}\$160.00 Filing Fee, Certificate} e of Status				

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:

. ARTSY ABODE	AT DELTONA, LLC				
	(Name of Foreign Limited	Lia	bility Company)		
Delaware		2	20-8933147		
(Jurisdiction under the la	w of which foreign limited liability	٥.	(FEI number, if app	licable)	
company is organized)	<u>-</u>				
4. <u>May 1, 2007</u>		5.	"perpetual"		
(Date of C	Organization)	υ,	(Duration: Year limited liability c exist or "perpetual")	ompany will c	ease to
6. <u>n/a</u>				75	<u>a</u> _
((Date first transacted business in I See sections 608.501 & 608.502 F.	iloria S. to	da, if prior to registration.) determine penalty liability)	FS	<u></u>
	ille Road, Suite 400, k		, , , , , , , , , , , , , , , , , , , ,	AHAS	
				SEE,	맘
	(Street Addres	s of	Principal Office)	11.0	?:
8. If limited liability c	ompany is a manager-manage	d co	ompany, check here XX)RIDA	À =
The name and wavel	husings addresses of the me	maa	ing members or managers are	og follower	
7. The hame and usual	business addresses of the ma	mag	ing members of managers are	as tollows.	
GO FISH INV	ESTMENTS, LLC			· 	
2722 Center	ville Road, Suite 400				
Wilmington,	DE 19808				
the jurisdiction under the law translation of the certificate u		opy i bmit	, au		uage, a
					
	/		. and .		
,	Signature of a member or an a (In accordance with section 608.408(3) an affirmation under the penalties of po	, F.S.	orized representative of a men , the execution of this document constitute that the facts stated herein are true.)	mber.	
	JOHN C. BOVAY, ESQUI	RE		_	
•	Typed or print	ed n	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 o	of the Limited Liability	Company is:	
ARTSY AE	BODE AT DELTONA, L	LC	
2. The name a	and the Florida street ac	ddress of the registered agent and office are:	155 93
	JOHN C. BOVAY		ELAE T
	一路		
	901 N.W. 57th	Street	FF. FIVE 2
	Florida Str	reet Address (P.O. Box NOT ACCEPTABLE)	ORDE -
	Gainesville	FL 32605	7
		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 608, Florida Statutes.

(Signature)

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

Delaware

PAGE 1

The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREBY CERTIFY "ARTSY ABODE AT DELTONA, LLC" IS
DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN
GOOD STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF
THIS OFFICE SHOW, AS OF THE TWENTY-SIXTH DAY OF JUNE, A.D. 2007.

ANYS OF CHANGE O

4343717 8300

070750220

Darriet Smith Windson

Harriet Smith Windsor, Secretary of State

AUTHENTICATION: 5794706

DATE: 06-26-07