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(Requestor's Name)		
(Address)		
(Address)		
(City/State/Zip/Phone #)		
(Oity/Otate/Elp/Filone#)		
PICK-UP WAIT MAIL		
(Business Entity Name)		
(Document Number)		
Certified Copies Certificates of Status		
Special Instructions to Filing Officer:		
•		

Office Use Only



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PRESENTATIONS

2012 DEC 20 M OF 47

2012 DEC 20 M OF 47

12 DEC 20 AH ID: 02

DEC 2 1 2012 T. **HAMPTON**



ACCOUNT NO. : 12000000195
REFERENCE : 466012 169624A
AUTHORIZATION : Juli Blend
COST LIMIT : \$125.00
ORDER DATE : December 19, 2012
ORDER TIME : 12:54 PM
ORDER NO. : 466012-005
CUSTOMER NO: 169624A
FOREIGN FILINGS
NAME: GOFSCO LLC
XXXX QUALIFICATION (TYPE: <u>LL</u>)
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:
CERTIFIED COPY XX PLAIN STAMPED COPY CERTIFICATE OF GOOD STANDING
CONTACT PERSON: Kimberly Moret EXT# 52949
EXAMINER:

CR2E027 (9/10)

COVER LETTER

SUBJECT:	Gofsco LLC	•
SUBJECT:	1	Name of Limited Liability Company
		iability Company for Authorization to Transact Business in Florida," Certificate of above referenced foreign limited liability company to transact business in Florida.
Please return	all correspondence concerning this	matter to the following:
	Kevin A. Denti, Esquire	
		Name of Person
	Kevin A. Denti, P.A.	
		Firm/Company
	2180 Immokalee Road - Suit	te #316
	<u>, voq.</u>	Address
	Naples, Florida 34110	
		City/State and Zip Code
	kdenti@dentilaw.com	
	E-mail address	s: (to be used for future annual report notification)
For further in	nformation concerning this matter, pl	lease call:
Kev	vin A. Denti, Esquire	239 260-8111
	Name of Person	Area Code & Daytime Telephone Number
Divi Reg P.O	ILING ADDRESS: ision of Corporations istration Section Box 6327 lahassee, FL 32314	STREET ADDRESS: Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301
	s a check for the following am 3125.00 Filing Fee \$130.00 Fi Certificate	ling Fee & □\$155.00 Filing Fee & □\$160.00 Filing Fee, Certificate

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 RUNNESS IN THE STATE OF FLORIDA.

Ш	MITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:		
1.	Gofsco LLC		
•	(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")	
	name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy usent of the managers or managing members adopting the alternate name. The alternate name must include "Limitec		m
	ompany," "L.L.C," "LIC.")	Liability	
2	Connecticut 3, 06-1635582		
((Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized)		
4.	June 19, 2003 Perpetual		
•	(Date of Organization) (Duration: Year limited liability company will ce exist or "perpetual")	ase to	
6.	N/A		
Ο.	(Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)	7 CER.	'n
7	215 5th Street South	品	
.•	Naples, Florida 34102	16F C	
	(Street Address of Principal Office)	i-	ئەسى سى
R	If limited liability company is a manager-managed company, check here	AM 10: 02	س س د
٥.	tribined monthly company is a manager-managed company, check nere	0 :	
9.	The name and usual business addresses of the managing members or managers are as follows:	2	ヹ
	Homer G. Scoville		
	215 5th Street South		
	Naples, Florida 34102		
ıΛ	. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official baving custo		<u>.</u>
	purisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign lang	-	yщ
	nslation of the certificate under oath of the translator must be submitted.)		
11.	. Nature of business or purposes to be conducted or promoted in Florida: real estate holding com	pany	
	A Commence of the second of th	<u></u> ;	
	71.1.11.		
	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. I am aware that any false information submitted in		
	document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.	5.) ·	
	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 Liabi	ility Company is:			
Gofsco LLC					
If unavailable	, the alternate to be	used in the state of Florida is:			
2. The name	and the Florida stree	et address of the registered agent and office are:			
	Kevin A. Denti, Esquire				
	: <u>* </u>	(Name)			
	2180 Immokalee Road - Suite #316				
	Florida Street Address (P.O. Box NOT ACCEPTABLE)				
	Naples	FL 34110			
	· · · · · · · · · · · · · · · · · · ·	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.

By: (Signature)

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

\$ 5.00 Certificate of Status (optional)

Office of the Secretary of the State of Connecticut

I, the Connecticut Secretary of the State, and keeper of the seal thereof, DO HEREBY CERTIFY, that articles of organization for

GOFSCO LLC

a domestic limited liability company, were filed in this office on June 19, 2003.

Articles of dissolution have not been filed, and so far as indicated by the records of this office such limited liability company is in existence.

Secretary of the State

Date Issued: December 19, 2012

Business ID: 0752183 Express Certificate Number: 2012286769001

Note: To verify this certificate, visit the web site http://www.concord.sots.ct.gov