(Re	questor's Name)	
(Ad	dress)	
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PICK-UP	☐ WAIT	MAIL
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Certified Copies	_ Certificates	s of Status
Special Instructions to I	Filing Officer:	·
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Office Use Only



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COVER LETTER

TO: Registration Se Division of Con				
SUBJECT: Seaside	e Investment Manage (Name of Limited			
The enclosed Articles of	f Organization and fee(s) are s	ubmitted for filing.		
Please return all corresp	ondence concerning this matte	er to the following:		
Cindy S. M	cCormick			
	. 0	re of Limited Liability Company) fee(s) are submitted for filing. g this matter to the following: (Name of Person) (Firm/Company) Ve (Address) (Address) (City/State and Zip Code) at (813) (Area Code & Daytime Telephone Number) mount: ing Fee & \$\subseteq \frac{1}{2} \fr		
	. (Firm/Company)	7	
5204 Gold	en Isles Drive		SEORE VLLAH	07 ∦ PI
	<u> </u>	(Address)	<u> </u>	<u> </u>
Apollo Bea	ach, FL. 33572		The section of the se	
	(City	/State and Zip Code)	SHE SHE	
For further information	concerning this matter, please	call:	274	
Cindy S. McCorn				
(Name	of Person)	(Area Code & Daytime To	elephone Number)	
Enclosed is a check for	or the following amount:			
\$125.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	Certified Copy	Certificate of State Certified Copy	us &
	Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee FL 32314	Street/Courier Addres Registration Section Division of Corporatio Clifton Building 2661 Executive Center	ns .	

Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

Seaside Investment M	anagement, LLC	፤ 	O7
		ny, "Limited Company" or their abbreviation "LLC," or "L.C.	
ARTICLE II - Addre		of the principal office of the Limited Liability.	23 T
The maning address a	nu street address	of the principal office of the Emilied Elability,	
Principal Office Add	ress:	Mailing Address:	12: 26 STATE
		500 4 O - L (- L) D - '	
5204 Golden Isles Drive		5204 Golden Isles Drive	
Apollo Beach, FL. 33572 ARTICLE III - Regis	any cannot serve as its	Apollo Beach, FL. 33572 gistered Office, & Registered Agent's Signa own Registered Agent. You must designate an individual or an	
ARTICLE III - Regis (The Limited Liability Compa business entity with an activ	any cannot serve as its e Florida registration.)	Apollo Beach, FL. 33572 gistered Office, & Registered Agent's Signa	
ARTICLE III - Regis (The Limited Liability Compa business entity with an activ The name and the Flore	any cannot serve as its e Florida registration.)	Apollo Beach, FL. 33572 gistered Office, & Registered Agent's Signa own Registered Agent. You must designate an individual or at a of the registered agent are:	
ARTICLE III - Regis (The Limited Liability Compa business entity with an activ The name and the Flor	any cannot serve as its e Florida registration.) rida street addres	Apollo Beach, FL. 33572 gistered Office, & Registered Agent's Signa own Registered Agent. You must designate an individual or at a of the registered agent are:	
ARTICLE III - Regis (The Limited Liability Compa business entity with an activ The name and the Flor	any cannot serve as its e Florida registration.) rida street addres	gistered Office, & Registered Agent's Signa own Registered Agent. You must designate an individual or as of the registered agent are: Name	
ARTICLE HI - Regis (The Limited Liability Compa business entity with an activ The name and the Flor	any cannot serve as its e Florida registration.) rida street addres andy S. McCormick 104 Golden Isles	gistered Office, & Registered Agent's Signa own Registered Agent. You must designate an individual or as of the registered agent are: Name	
ARTICLE III - Regis (The Limited Liability Compa business entity with an activ The name and the Flor Cit	any cannot serve as its e Florida registration.) rida street addres andy S. McCormick 104 Golden Isles	gistered Office, & Registered Agent's Signa own Registered Agent. You must designate an individual or as of the registered agent are: Name Drive	

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, F.S..

Registered Agent's Signature (REQUIRED)

(CONTINUED)
Page 1 of 2

ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:	
MGR	Cindy S. McCormick	
	5204 Golden Isles Drive	
	Apollo Beach, FL. 33572	
MGRM	Roger Terhorst, Jr.	
**************************************	7013 Monarch Park Drive ≥ ∽	0
	Apollo Beach, FL. 33572	7 A
	Tri A	7 APR 23
MGRM	Benjamin Terhorst	\sim
	7013 Monarch Park Drive	
	Apollo Beach, FL. 33572	===
		12:2
	and the first	9
n effective date is listed, the date must l	e date of filing: (OPTION be specific and cannot be more than five business da	
90 days after the date of filing.) REQUIRED SIGNATURE:		
•		
Signature of a ment	ber or an authorized representative of a member.	
(In accordance with s	section 608.408(3), Florida Statutes, the execution stitutes an affirmation under the penalties of perjury	
(In accordance with s	section 608.408(3), Florida Statutes, the execution stitutes an affirmation under the penalties of perjury herein are true.)	

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent \$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)