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SELVAL YASSEF, FLORIDA

B. BOSTICK
JUN 21 2011
EXAMINER

COVER-LETTER

TO:	Registratio Division of	n Section Corporations		
SUBJE	_{ct:} Sun	coast Connectivity		
20202		Name of Limited	Liability Company	
The end	closed Article	s of Organization and fee(s) are su	bmitted for filing.	
Please r	eturn all corre	espondence concerning this matter	to the following:	
<u>.</u>	Jeremy			
		N	ame of Person	
	Suncoa	st Connectivity		
_		F	irm/Company	
_	4511 U	S Hwy 19 North, Suit		
			Address	 1
Ē	Palmetto	, FL 34221		11 J
		•	State and Zip Code	JUN 20 CHE KAGA
<u> </u>	eremy.pip	per@rocketmail.com E-mail address: (to be used for	future annual report notification)	
For furt	her information	on concerning this matter, please ca	<u>-</u>	PH 1:27
Jeren	ny Piper	a	at (941) 447-9494	D
	Nar	ne of Person	Area Code & Daytime Telep	bhone Number
Enclose	ed is a check	for the following amount:		
\$125.00	Filing Fee	\$130.00 Filing Fee & Certificate of Status	\$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
		Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street/Courier Address Registration Section Division of Corporations Clifton Building 2661 Executive Center C Tallahassee, FL 32301	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:	
The name of the Limited Liability Company is:	
Suncoast Connectivity LLC	
(Must end with the words "Limited Liability	y Company, "L.L.C.," or "LLC.")
ARTICLE II - Address:	
The mailing address and street address of the prin	ncipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
4511 US Hwy 19 North, Suite J	4511 US Hwy 19 North
Suite J	Suite J
Palmetto, FL 34221	Palmetto, FL 34221
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Register business entity with an active Florida registration.)	
The name and the Florida street address of the re-	gistered agent are:
Lee Piper	

Name 1715 14th Ave W

Florida street address (P.O. Box NOT acceptable)

Palmetto

FL 34221

City, State, and 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, F.S.

Registered Agent's Signature (REQUIRED)

(CONTINUED)

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

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

Name and Address:
Jeremy Piper 4511 US Hwy 19 N, Suite J Palmetto, FL 34221
55 0 F
PRIDA 27
e date of filing: (OPTIONAL) be specific and cannot be more than five business days p

(In accordance with section 608.408(3), Florida Statutes, 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 a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)

Jeremy Piper

Typed or printed name of signee

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)