## Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H210004389313)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : HUBCO

Account Number : 104662003400

Phone

: (516)935-3940

Fax Number

: (516)935-3088

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\* CHAPUTTATIANA@GMAIL.COM

Email Address:

## FLORIDA LIMITED LIABILITY CO. SUNCOAST DREAM LIFE LLC

Certificate of Status	1
Certified Copy	0
Page Count	03
Estimated Charge	\$130.00

Electronic Filing Menu

Corporate Filing Menu

31.C 3 2021

H21000438931

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

	SUNCOAST DE	REAM LIFE	LLC			
	(Must end with the words "Lin	nited Liability C	Company, "L.L.C.,"	" or "LLC.")		
ARTICLE II - Add The mailing address	ress: and street address of the princip	pal office of the	Limited Liability	Company is:		
Principal Office Ad	dress: N	Aailing Addres	<u>s:</u>			
3311 JAFFA DE SARASOTA, FL			JAFFA DRIVE ASOTA, FL 34			
(The Limited Liabili another business ent	ristered Agent, Registered Offi ty Company cannot serve as its tity with an active Florida regist orida street address of the regis	own Registered tration.)	Agent. You must	designate an individ	lual or _ 2021 (	
The fame and the	TATIANA CHAPUT	Ū		AHA ALL		1
		Vame	<u> </u>	- SSE	<u> </u>	ŗ
	3311 JAFFA DRIVE			<b>ن.</b> 100 س	À	$T^{r}$
	Florida street address (P.O	. Box <u>NOT</u> acc	eptable)		<del>-3ε</del> Θ	
	SARASOTA	FL	34239		0.1 :8	
	City	-	Zip	D		
the place designation of the connection of the c		accept the appoisions of all statu he obligations of Chapter 605, F	intment as registere tes relating to the p. f my position as reg	ed agent and agree to proper and complete	o act in th performa	nce
	Registered Agent's	Signat <b>er</b> ¢ (REQ A CHAPUT	UIKED)			
•	LATIAN	Y CHYLOL				
	(CONT	TINUED)				

H21000438931

Title:	Name and Address:	
"AMBR" = Authorized Member		
"MGR" = Manager AMBR	TATIANA CHAPUT	
	3311 JAFFA DRIVE SARASOTA, FL 34239	
AMBR	-MARK KACH ₽S	23
YNVIDIX	3311 JAFFA DRIVE	
	SARASOTA, FL 34239	
·	ASS	1
	77 77	
	Γ.α.	ά.
		~
		>
(Use attachment if necessary)		
ICLE V: Effective date, if other than the effective date is listed, the date must b	date of filing: 12/01/2021 (OPTIONAL) e specific and cannot be more than five business days prior to or 90 d	lays
ICLE V: Effective date, if other than the a effective date is listed, the date must b ate of filing.)	date of filing: 12/01/2021 (OPTIONAL) e specific and cannot be more than five business days prior to or 90 d	lays :
ICLE V: Effective date, if other than the effective date is listed, the date must bate of filing.)	date of filing:12/01/2021 (OPTIONAL) e specific and cannot be more than five business days prior to or 90 d	lays a
ICLE V: Effective date, if other than the effective date is listed, the date must be ate of filing.)  ICLE VI: Other provisions, if any.  REQUIRED SIGNATURE:	E specific and cannot be more than five business days prior to or 90 to	days
CLE V: Effective date, if other than the effective date is listed, the date must be site of filing.)  CLE VI: Other provisions, if any.  REQUIRED SIGNATURE:  Signature of: (In accordance with sect constitutes an affirmation of the sect constitutes any fall am aware that any fall.)	date of filing:	days
ICLE V: Effective date, if other than the confective date is listed, the date must be ate of filing.)  ICLE VI: Other provisions, if any.  REQUIRED SIGNATURE:  Signature of a constitutes an affirmation of any aware that any fall.	a member or an authorized representative of a member.  tion 605.0203 (1) (b), Florida Statutes, the execution of this document on under the penalties of perjury that the facts stated herein are true. see information submitted in a document to the Department of State	days :

Page 2 of 2