

(Red	uestor's Name)	
(Add	iress)	
(Add	(ress)	
·	·	
	//State/Zip/Phone	
(011)	notaterzipir none	= 11
PICK-UP	☐ WAIT	MAIL
(Rus	iness Entity Nar	nel
,	···	,
(Doc	cument Number)	
Certified Copies	Certificates	s of Status
,		
·		
Special Instructions to F	Filing Officer:	

Office Use Only



200009571162

12/20/02--01049--003 **130.00

1.2595-623 WOZ-35UUR

TRANSMITTAL LETTER

(Proposed limited liability company name - must include suffix)

Filing fee for articles of organization of Florida Limited Liability Company:

Department of State Division of Corporations

Tallahassee, FL 32314

Enclosed is an original and one (1) copy.

P.O. Box 6327

\$100.00 Filing fee for Articles of Organization \$25.00 Designation of Registered Agent A letter of acknowledgement will be issued free of charge upon filing. Please sul additional \$5 if a certificate of status is needed. The fee for a certified copy is \$3 Please send one check for the total amount made payable to the Flor Department of State.	0.	
FROM: Joanne Butcher Name (Printed or typed) 7201 NE 84n Avenue	DZ TEC 20 AM D: 08	FILED VND:
Address Boca Raton, FL 33487 City, State & Zip 561-995-2552:		-

Daytime Telephone number



FLORIDA DEPARTMENT OF STATE Jim Smith Secretary of State

December 23, 2002

JOANNE BUTCHER 7201 NE 8TH AVE BOCA RATON, FL 33487

SUBJECT: GOLD COAST HOME SOLUTIONS

Ref. Number: W02000035642

We have received your document for GOLD COAST HOME SOLUTIONS and your check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of a Limited Liability Company must end with the words "limited company", "limited liability company" or their abbreviation "Ltd. Co." "L.C." or "L.L.C."

Section 608.407, Florida Statutes, requires the document(s) to be signed by a member or by the authorized representative of a member.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6025.

Trevor Brumbley Document Specialist

Letter Number: 602A00067041

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limit	ted Liability (Company is:	,		
Gold (Coast	Home	Solutio	n S	LLC
ARTICLE II - Addr					
The mailing address a	nd street addr	ess of the princip	al office of the Limi	ted Liabil	ity Company is:
7491 N.	Fed	leral Hu FL 334	UY C-5#	183	
•	,				
ARTICLE III - Regi	stered Agent	, Registered Offi	ce, & Registered A	gent's Si	gnature:
The name and the Flor	rida street ado	lress of the registe	ered agent are:		
	_Jo	anne B OI NE 8	ntcher		
		Nai	ne i		
	<u> </u>	01 NE 8	Avenue		
		da street address (P.C Oca Raton). Box <u>NOT</u> acceptable) FL	<u>.</u>	
		City, State	•	1	-
therefore, a manager	he place designagree to act in eproper and constitute of my position of my position ement (Check bility Compander managed constitute of the constitute of th	nated in this certical this capacity. If complete performance as registered as Registered k box if applicability is to be manager performance.	ficate, I hereby accepturther agree to compance of my duties, and tent as provided for it Agent's Signature le.) ed by one manager of	ot the apports the poly with the definition of t	ointment as e provisions of all niliar with and 608, F.S
(An	additional arti	icle must be edde	d if an effective date	is reques	ted)
	Loan	ne Du	uka, me	mbe	
S	lignature of a n	ember or an author	rized represéntative of	a member.	
1	of this documen		(3), Florida Statutes, the nation under the penaltie		,
	JULIUM	Typed or printed	The state of the s		سخار ا

Filing Fees:

\$100.00 Filing Fee for Articles of Organization \$ 25.00 Designation of Registered Agent \$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)