

W300000/66/2

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

(Document Number)

Certified Copies

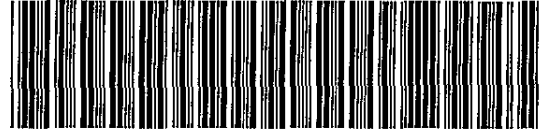
1

Certificates of Status

Special Instructions to Filing Officer:

5/7 FL LC CC

Office Use Only



900017926069

WJH

05/07/03--01107--012 \*\*155.00

FILED

03 MAY -7 AM 8:56

SECRETARY OF STATE  
TALLAHASSEE FLORIDA

Saturday, May 3, 2003

Registration Section  
Division of Corporations  
Post Office Box 6327  
Tallahassee, FL 32314

Ladies and Gentlemen:

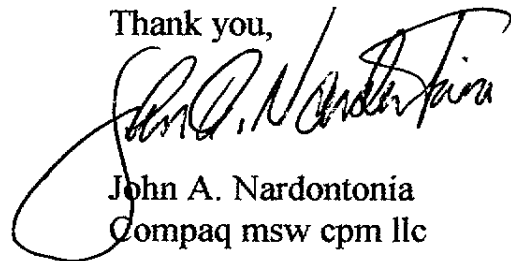
Find enclosed our ARTICLES OF ORGANIZATION forming COASTAL  
PROPERTY MANAGEMENT, LLC.

Also find our check for \$155.00 representing the filing fee, designation of  
registered agent, and requesting certified copy.

Please forward all correspondence, letter of acknowledgment, and certified  
copy to:

John A. Nardontonia  
406 Rosedale Drive  
Satellite Beach, FL 32937-3323  
321-773-6603

Thank you,

A handwritten signature in black ink, appearing to read "John A. Nardontonia", is written over the typed name and company name. The signature is fluid and cursive, with a large loop at the beginning and end.

John A. Nardontonia  
Compaq msw cpm llc

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

### ARTICLE I - Name:

The name of the Limited Liability Company is:  
COASTAL PROPERTY MANAGEMENT, LLC

### ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:  
406 ROSEDALE DRIVE, SATELLITE BEACH, FL 32937-3323

### ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

The name and the Florida street address of the registered agent are:

JOHN A. NARDONTONIA

Name

406 ROSEDALE DRIVE

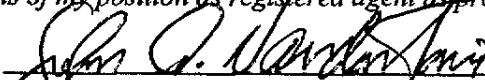
Florida street address (P.O. Box **NOT** acceptable)

SATELLITE BEACH

FL 32937-3323

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

(An additional article must be added if an effective date is requested)



Signature of a member or an authorized representative of a member.

(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.)

JOHN A. NARDONTONIA

Typed or printed name of signer

### 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)

SECRETARY OF STATE  
TALLAHASSEE FLORIDA

03 MAY -7 AM 8:56

FILED