

LD30000 49088

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP  WAIT  MAIL

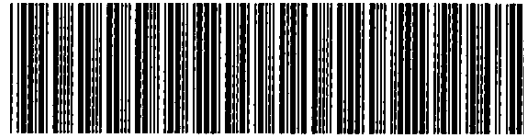
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



500077584645

08/07/06--01007--024 \*\*25.00

06 AUG -7 PM 4: 17  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED

88  
MST

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** BLUE COAST GROUP, LLC  
(Name of Limited Liability Company)

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

FERNANDO DACOSTA  
(Name of Person)

BLUE COAST GROUP, LLC  
(Firm/Company)

1911 NW 150 AVE B-1  
(Address)

PEMBROKE PINES, FL 33027  
(City/State and Zip Code)

For further information concerning this matter, please call:

FERNANDO DACOSTA at ( 954 ) 436-4220  
(Name of Person) (Area Code & Daytime Telephone Number)

**STREET/COURIER ADDRESS:**

Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, Florida 32301

**MAILING ADDRESS:**

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314

**Enclosed is a check for the following amount:**

\$25 Filing Fee

\$55 Filing Fee & Certified Copy

FILED  
06 AUG - 7 PM 4: 17  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

