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TRANSMITTAL LETTER

TO: Registration Section		
Division of Corporations		
SUBJECT: Coastal Group Services, LLC		
(Name of Lin	mited Liability Company)	
The enclosed Articles of Organization and fee(s) a	are submitted for filing.	
Please return all correspo	ondence concerning this matter to the following:	
Wallace E. Geiger		
	(Name of Person)	
Coastal Group Services, LLC		
	(Firm/Company)	A 50 5
7 Oscar Hill Road		LAH)
	(Address)	916
Tarpon Springs, Florida 3468	39	F. R. T.
	(City/State and Zip Code)	12: 27 ORIO
For further information concerning this matter, ple	ease call:	27 110A
Wallace Geiger	at (727) 505-6439	
(Name of Person)	(Area Code & Daytime Telephone Number	er)

STREET ADDRESS:

Registration Section Division of Corporations 409 E. Gaines Street Tallahassee, Florida 32399 MAILING ADDRESS:

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

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The undersigned, for the purpose of forming a limited liability company under the Florida Limited Liability Company Act, F.S. Chapter 608, hereby make, acknowledge, and file the following Articles of Organization.

ARTICLE I -- NAME

The name of the limited liability company is:

Coastal Group Services, LLC	SEI	2	
ARTICLE II — ADDRESS	AHA	APR	1
The mailing address and street address of the principal office of the company		16 P	m
7 Oscar Hill Rd.	FLOI	:2: HG	
Tarpon Springs, FL 34689	ab/ √ii.	27	

ARTICLE III — DURATION

The company shall commence its existence on the date these articles of organization are filed by the Florida Department of State or on another effective date if specified. The company's existence shall be perpetual unless the company is dissolved earlier as provided in these articles of organization or in the regulations.

ARTICLE IV — REGISTERED OFFICE AND AGENT

The name and street address of the registered agent of the company in the state of Florida are;

Wallace E. Geiger 7 Oscar Hill Rd. Tarpon Springs, FL 34689

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, Florida Statutes.

Registered Agent's Signature

ARTICLE V — MANAGER OR MANAGEING MEMBER

The name and address of each Manager of Managing Member's as follows:

Wallace E. Geiger

7 Oscar Hill Rd.

Tarpon Springs 34689

Victor S. Geiger

7 Oscar Hill Rd.

Tarpon Springs 24689

REQUIRED SIGNATURE:

Wallace E. Geiser

Victor S. Geiger

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes a affirmation under the penalties of perjury that the facts stated herein are true.)