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(Re	equestor's Name)	
(Ac	ldress)	
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(Cit	ty/State/Zip/Phone	e#)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
		- The state of the

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LEMAN III

JAN - 7 2005

TRANSMITTAL LETTER

TO:

Registration Section Division of Corporations

Tallahassee, Florida 32399

SURIECT:	NAPLES	COASTAL LLC			~ · ·
DODUECT.		(Name of Limited	d Liability Co	mpany)	
The enclosed	d Articles of	Organization and fee(s) are so	ubmitted for fi	iling.	TONS OF SORPUR SEE, FLORIDA
Please return	n all correspo	ondence concerning this matte	r to the follow	ving:	ST ST
	WILLIAM	C. McCURDY			FLOR
		(t	Name of Person)	
					,
NAPLES	COASTAL			······································	
		0	Firm/Company))	
3	25 EGRET	AVENUE			· · · · · · · · · · · · · · · · · · ·
			(Address)		
	NAPL	ES, FL 34108		; .	2 1 1
	-	(City/	State and Zip C	Code)	'.
For further i	information o	concerning this matter, please	call:		
WILLIAM C	C. McCURD	ıΥ	at (239	596-6343	
	(Name	of Person)	(Area	Code & Daytime To	elephone Number)
Enclosed is	a check fo	r the following amount:			
⋾ \$125,00 I	Filing Fee	\$130.00 Filing Fee & Certificate of Status	Certified C	O Filing Fee & Copy opy is enclosed)	☐ \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
		ET ADDRESS:		MAILING A	
Registration Section Division of Corporations		Registration Section Division of Corporations			
	409 E	Gaines Street		PO Roy 632	7 -

Tallahassee, Florida 32314

-> 94: 590 4024; Page

HAGELVEG: 12/30/04 12:24FM;

Dec-30-04 12:08P

P.01

ARTICLES OF OR	IGANIZATION F	OR FLORID	A LIMITED I	LABILITY COMPANY
4 THORN (18 TO D. 18				芦星型
ARTICLE I - Nan		i		至今人
The name of the Li	mited Liability Com	parry is:		200
NAPLES COASTAL	uc			M-3 PM 1: 32
MAPLES COASTAL				
ARTICLE II - Ad	dress:			
		of the principal	office of the Lis	mited Liability Company is:
Principal Office A	ddres:	Mail	ing Address:	
3.	<u></u>	*****		
WILLIAM C. McCUR	DY	MILL	IAM C. McCURDY	<u></u>
325 EGRET AVENU	E		GRET AVENUE	
NAPLES, FL 34108		NAPL	ES, FL 34108	
	Florida street address WILLIAM C. McCURE	_	oo agent are.	
		Name		_
	325 EGRET AVENUE	<u>.</u>		
	Florida stro		U. Hox <u>NOT</u> eccep	(able)
	NAPLES,	FL.	34108	
	Ci	ty, State, and Zip		
hability compa registered agent ar statutes relating t	ny at the place design nd agree to act in this to the proper and con	acted in this cere capacity. I fun aplete performa	tificate, I hereby ther agree 10 con nce of my duties,	s for the above stated limited accept the appointment as apply with the provisions of all and I am familiar with and I for in Chapter 608, F.S.
		2	<u> </u>	· .
	. سىدىد ئىلى دى ()	ad Amend's Cianus	STOP	

(CONTINUED)

Page Loft 3

ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

<u>Title:</u>	Name and Address:	
"MGR" = Manager	Q. []	
"MGRM" = Managing Member		
MGR	WILLIAM C. McCURDY 325 EGRET AVENUE NAPLES, FL 34108	
	325 EGRET AVENUE	
	NAPLES, FL 34108	
MGR	LYNNE McCURDY	
	99 11th AVENUE S.	
	NAPLES, FL 34102	
(Use attachment if necessary)		
		>
NOTE: An additional article must	t be added if an effective date is requested. See page 3of	_
REQUIRED SIGNATURE:		
\cap	1 1 0	
Amre	e Melura	

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.)

LYNNE A. McCURDY

Typed or printed name of signee

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

- \$ 30.00 Certified Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)

ARTICLE V - Effective Date:

The effective date of Naples Coastal LLC shall be January 3, 2005

Du

TIMES JAM -3 PM 1:32
TOWN SEE, FLORIDA

TOWN SEE, F