L05000023026

(Requestor's Name)
(Address)
(Address)
(Addiess)
(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



000047542890

03/08/05--01039--020 **155.00

05 MAR -8 AM II: 300 H . - 0 11 H 33

TRANSMITTAL LETTER

TO: Registration Se Division of Co			
SUBJECT: Gulf Co	past Real Estate, LLC	d Liability Company)	
	(Name of Emilio	d Clabinty Company)	
The enclosed Articles o	f Organization and fee(s) are s	ubmitted for filing.	
Please return all corresp	ondence concerning this matte	r to the following:	
Faye S.	Chancey		
	(1	Name of Person)	
		Firm/Company)	
	,	rum Company)	
102 Brian D	rive		
 		(Address)	/
One of			
Crest	view FL 32536	State and Zip Code)	
	(City)	State and Lip Code)	
			05 المارية المارية
For lurther information	concerning this matter, please	call:	\[\sigma_{\infty} \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\
F		000 4040	AHA T
Faye Chancey		at (_850) 682-4612	<u> </u>
(Name	of Person)	(Area Code & Daytime To	
manification 1 1 ft.	41 6 11		
Enclosed is a check to	r the following amount:		OR: 43
☐ \$125.00 Filing Fee	☐ \$130.00 Filing Fee &	☐ \$155.00 Filing Fee &	□ \$160.00æiling F∞,
	Certificate of Status	Certified Copy	Certificate of Status &
		(additional copy is enclosed)	Certified Copy (additional copy is enclosed)
STRE	ET ADDRESS:	MAILING A	DDRESS:
Registration Section		Registration S	

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

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

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:	
Gulf Coast Real Estate, LLC	
ARTICLE II - Address: The mailing address and street address of the pr	incipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
102 Brian Drive, Crestview FL 32536	102 Brian Drive, Crestview, FL 32536
ARTICLE III - Registered Agent, Registered	Office, & Registered Agent's Signature:
The name and the Florida street address of the re	egistered agent are:
Faye S. Chancey	
Name	
102 Brian Drive	
Florida street add	ress (P.O. Box NOT acceptable)
Crestview	FL Z.
City, State, a	nd Zip Eig S
	nccept service of process for the above state imited his certificate, I hereby accept the appointment as I further agree to comply with the provisions of all reformance of my duties, and I am familiar with and

(CONTINUED)

The name and address of each Manager or Managing Member is as follows:				
<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:			
MGR M	Faye S. Chancey			
MERMMER	MARKE. CHANCEY			
(Use attachment if necessary)				
NOTE: An additional article must be added if an effective date is requested.				
(In accordance with section of this document constitute that the facts stated here	OF printed name of signee			
Filing Fees: \$125.00 Filing Fee for Articles of Organize of Registered Agent \$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)	ation and Designation			

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