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SECRETARY OF STATE
TALL AHASSEE FLORID



TRANSMITTAL LETTER

TO: Registration Section Division of Corporations			
SUBJECT: Surfside Concierge, (Name of Limited	L.L.C. Liability Company)		
The enclosed Articles of Organization and fee(s) are sub- Please return all correspondence concerning this matter	_		
- 10-10-10-10-10-10-10-10-10-10-10-10-10-1			
Tammy Barr (Name of Person)			
(148	ane of reison)		
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(Fi	rm/Company)	FILEU 19 PN 1: 19 ECRETARY OF STATL	
		SEE	
102_1st Street North		7.0	
	(Address)	97	
		<u> </u>	
Bradenton Beach, FL 3	4217		
(City/State and Zip Code)			
(,		
For further information concerning this matter, please ca	all:		
	at (941) 713 - 720	1	
(Name of Person)	(Area Code & Daytime Te	lephone Number)	
Enclosed is a check for the following amount:			
\$125.00 Filing Fee \$\square\$\$\$ \$130.00 Filing Fee & Certificate of Status	☐ \$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	□ \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)	
STREET ADDRESS: Registration Section Division of Corporations 409 E. Gaines Street Tallahassee, Florida 32399	MAILING AI Registration Se Division of Co P.O. Box 6327 Tallahassee, Fi	ection rporations	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 - NAME:

The name of the Limited Liability Company is:

SURFSIDE CONCIERGE, L.L.C.

ARTICLE 2 - ADDRESS

The mailing and street address of the principal office of the Limited Liability Company is:

102 1st Street North Bradenton Beach, Florida 34217

ARTICLE III, REGISTERED AGENT, REGISTERED OFFICE, AND RESIDENT & AGENT'S SIGNATURE:

The name and Florida Street Address of the registered agent are:

Tammy Barr 102 1st Street North Bradenton Beach, FL 34217

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

ARTICLE IV- MANAGERS OR MANAGING MEMBERS:

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

Managing Member

Tammy Barr

102 1st Street North

Bradenton Beach, FL 34217

Managing Member

Jonathan D. Wright 609 49th Street Court West Bradenton, FL 34209

SIGNATURE:

Signature of a Member

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

Typed or Printed Name of signee

FILED IN 19 9 IN 1: 19
SECRETARY OF STATE.