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PICK-UP	☐ WAIT	MAIL
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## TRANSMITTAL LETTER

TO: Registration Se Division of Co			
SUBJECT: SUNCOA	ST HOUSING SOLUTIONS	S, LLC	
	(Name of Limite	d Liability Company)	
The enclosed Articles of	Organization and fee(s) are s	ubmitted for filing	
		_	
Please return all corresp	ondence concerning this matte	er to the following:	
BRIAN T	HIESING		
	(I	Name of Person)	
SUNCOAST HOUSI	NG SOLUTIONS, LLC		
	(	Firm/Company)	
	•		وے ک
6033 12TH	AVE		
		(Address)	長 麦丁
			HAS 19 L
NEW	PORT RICHEY, FL. 33653		SERVICE REPORT OF THE PERSON O
	(City/	State and Zip Code)	मुल्ला ।
For further information of	concerning this matter, please	call:	PILL ORPORATIONS DIVING CORPORATIONS DIVING CORPORATIONS DIVING CORPORATIONS
ROBERT S WELSH		at ( 727 ) 845-6180	
(Name	of Person)	(Area Code & Daytime Te	elephone Number)
Enclosed is a check fo	r the following amount:		
<b>Ø</b> \$125.00 Filing Fee	\$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)
STRE	ET ADDRESS:	MAILING A	DDRESS:
	ration Section	Registration S	
	on of Corporations Gaines Street	Division of Co P.O. Box 632	
Tallah	assee, Florida 32399	Taliahassee, F	

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the Limited Liability Compa	ny is:
SUNCOAST HOUSING SOLUTIONS, LLC	
ARTICLE II - Address:	
The mailing address and street address of	the principal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
6033 12TH AVE	6033 12TH AVE
NEW PORT RICHEY, FL. 34653	NEW PORT RICHEY, FL. 34653
ARTICLE III - Registered Agent, Regis	stered Office, & Registered Agent's Signature;  f the registered agent are:
The name and the Florida street address of BRIAN THIESING	f the registered agent are:
The name and the Florida street address of BRIAN THIESING	stered Office, & Registered Agent's Signature;  f the registered agent are:
The name and the Florida street address of BRIAN THIESING	f the registered agent are:
The name and the Florida street address of BRIAN THIESING  6033 12TH AVE	f the registered agent are:
The name and the Florida street address of BRIAN THIESING  6033 12TH AVE	f the registered agent are:

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

(CONTINUED)

Page 1 of 2

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

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

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:
MGRM	BRIAN THIESING
	NEW PORT RICHEY, FL. 34653
MGR	AGNES THIESING 6033 12TH AVE
	NEW PORT RICHEY, FL. 34653
**************************************	
**************************************	
(Use attachment if necessary)	added if an effective date is requested. PSC 22.25
NOTE: An additional article must be	added if an effective date is requested.
REQUIRED SIGNATURE:	SER PROPERTY.
The	4
(In accordance with section	an authorized representative of a member.  608.408(3), Florida Statutes, the execution an affirmation under the penalties of perjury are true.)
BRIAN THIESING	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)