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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Pelican Cay Harbor, LLC
(Name of Limited Liability Company)

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Pamela Setchell

(Name of Person)

Joe Miklas, P.A.

(Firm/Company)

P.O. Box 366

(Address)

Islamorada, FL 33036

(City/State and Zip Code)

For further information concerning this matter, please call:

Pamela Setchell

(Name of Person)

at (305) 852-7225 (ext. 206)

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- ☐ \$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)

Mailing Address

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

Street/Courier Address

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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ARTICLES OF ORGANIZATION
OF

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

PELICAN CAY HARBOR, LLC

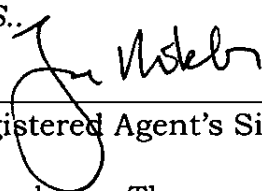
ARTICLE I – Name: The name of the Limited Liability Company is
PELICAN CAY HARBOR, LLC

ARTICLE II – Address: The mailing address and principal office of the
Limited Liability Company is: 299 Morris Avenue, Key Largo, FL 33037.

ARTICLE III – Registered Agent, Registered Office & Registered Agent's
Signature: The name and Florida street address of the registered agent
are:

Joe Miklas
88765 Overseas Highway
Tavernier, FL 33070

*Having been named 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.*

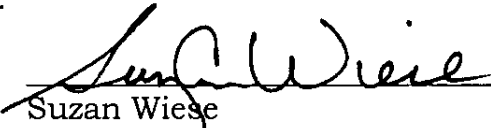


Registered Agent's Signature

ARTICLE IV – Managers or Managing Members: The name and address
of each Manager or Managing Member is as follows:

Suzan Wiese – Managing Member
299 Morris Avenue
Key Largo, FL 33037

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



Suzan Wiese