

LOB 000099885

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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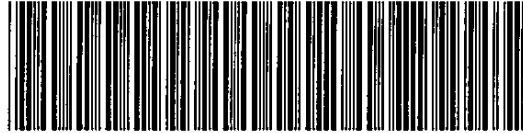
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

LOB-99885  
QR

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Coast2Coast Private Lending

(Name of Limited Liability Company)

Dear Sir or Madam:

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

Please return all correspondence concerning this matter to the following:

William C. Cannon, Jr.

(Name of Person)

Coast2Coast Private Lending

(Firm/Company)

103 West Church Street, Suite 103

(Address)

Orlando, Florida 32801

(City/State and Zip Code)

For further information concerning this matter, please call:

Chad Creech

(Name of Person)

at ( 321 ) 256-1929

(Area Code & Daytime Telephone Number)

**STREET/COURIER ADDRESS:**

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

**MAILING ADDRESS:**

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

**Enclosed is a check for the following amount:**

☒ \$25 Filing Fee

☐ \$30 Filing Fee &  
Certificate of Status

☐ \$55 Filing Fee &  
Certified Copy

☐ \$60 Filing Fee,  
Certificate of Status &  
Certified Copy

CR2E062 (08/05)

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2006 NOV 14 PM 1:21  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLES OF CORRECTION  
FOR  
FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY**

Pursuant to section 608.4115, F.S., this document is being submitted **within the required 30 business days** to correct the **attached** articles of organization or application to transact business in Florida.

**FIRST:**      The name of the limited liability company is:  
Coast2Coast Private Lending

**SECOND:**    The articles of organization or the application to transact business

**(CHECK THE APPROPRIATE BOX AND COMPLETE THE APPLICABLE STATEMENT)**

- ☒ Contains an incorrect statement. The incorrect statement, the reason the statement is incorrect, and the corrected statement are as follows:  
The manager member should be William C. Cannon, Jr.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

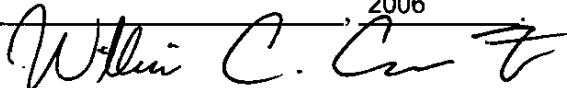
**OR**

- ☐ Was defectively signed. The manner in which the document was defectively signed and the appropriate correction are as follows:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Dated: November 9

2006



\_\_\_\_\_  
Signature of a member or authorized representative of a member

William C. Cannon, Jr.

\_\_\_\_\_  
Typed or printed name of signee

**Filing Fee:**            \$25.00  
**Certified Copy:**    \$30.00 (optional)

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2006 NOV 14 PM 1:21  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**Electronic Articles of Organization  
For  
Florida Limited Liability Company**

L06000099885  
FILED 8:00 AM  
October 12, 2006  
Sec. Of State  
mthomas

**Article I**

The name of the Limited Liability Company is:  
COAST2COAST PRIVATE LENDING, LLC

**Article II**

The street address of the principal office of the Limited Liability Company is:  
127 W CHURCH ST  
SUITE 103  
ORLANDO, FL. US 32801

The mailing address of the Limited Liability Company is:  
127 W CHURCH ST  
SUITE 103  
ORLANDO, FL. US 32801

**Article III**

The purpose for which this Limited Liability Company is organized is:  
ANY AND ALL LAWFUL BUSINESS.

**Article IV**

The name and Florida street address of the registered agent is:  
CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL. 32301

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.

Registered Agent Signature: LAURA R DUNLAP

### **Article V**

The name and address of managing members/managers are:

Title: MGRM  
WILLIAM C CANNON  
127 W CHURCH ST, SUITE 103  
ORLANDO, FL. 32801 US

Signature of member or an authorized representative of a member

Signature: WILLIAM C CANNON

L06000099885  
FILED 8:00 AM  
October 12, 2006  
Sec. Of State  
mthomas