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(Requestor's Name)	-
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V. Marie 200,	
(City/State/Zip/Phone #)	
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PICK-UP WAIT MAIL	
(Business Entity Name)	
(Document Number)	
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Certified Copies Certificates of Status	
Special Instructions to Filing Officer:	
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## **COVER LETTER**

	ion Section of Corporations		•
SUBJECT:	PREMIER COA	STAL PROPE	27, ES LC
	(Name of Limited I	iability Company)	ı
The enclosed Artic	les of Organization and fee(s) are sub	mitted for filing.	
Please return all co	rrespondence concerning this matter to	o the following:	
	RILHARD (Na	(OBIN)	
	(Na	ne of Person)	
	(Fir	m/Company)	
		•	, _
	2929 E. COMMI	PRCIAC BLUD	. 30ite 702
	-ORT LAUDERDAY		
<del></del>	(City/St	ate and Zip Code)	70 6
	` •	• •	
For further informa	tion concerning this matter, please cal	I:	
RICHAR	Name of Person) at	(Area Code & Daytime Tel	7531
(1)	Name of Person)	(Area Code & Daytime Tel	lephone Number)
Enclosed is a che	ck for the following amount:		
<b>⊠</b> \$125.00 Filing F	ee \$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 Corporation Clifton Building 2661 Executive Center (	s

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY ARTICLE I - Name: The name of the Limited Liability Company is: Coastal Properties, ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is: **Mailing Address:** Principal Office Address: E. COMMERCIAL BLUD ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: (The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.) The name and the Florida street address of the registered agent are: Richard TOBIN 2929 E. COMMERCIAL BLUD. #702 Florida street address (P.O. Box NOT acceptable) FORT LAUDERDY FL 33305 City, State, and Zip 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

Registered Agent's Signature (REQUIRED)

accept the obligations of my position as registered agent as provided for in Chapter 608, F.S..

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

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

,	Title: "MGR" = Manager	Name and Address:
•	"MGRM" = Managing Member  MGRM	RICHARD TOBIN 2929 E. COMMERCIAL BLUD. 4707 FORT LANDERDALE FL. 33308
If an	(Use attachment if necessary)  CLE V: Effective date, if other than the effective date is listed, the date must 0 days after the date of filing.)	ne date of filing: (OPTIONAL)  be specific and cannot be more than five business days prior
	REQUIRED SIGNATURE:	
	Signature of a mem	ber or an authorized representative of a member.
	of this document con that the facts stated	
	Richard	Typed or printed name of signee
	,	types of printed name of signer
	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)