

LO8000078437

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

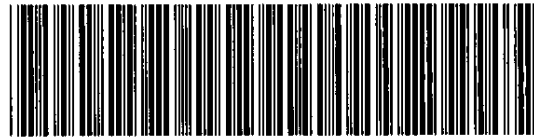
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TALLAHASSEE, FLORIDA

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08 AUG 15 AM 9:55  
DEPARTMENT OF STATE  
TALLAHASSEE, FLORIDA

B. KOHR

AUG 18 2008

EXAMINER

# CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301  
(850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

*Shoreline Development  
Consultants, LLC*

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- ☐ Art of Inc. File
- ☐ LTD Partnership File
- ☐ Foreign Corp. File
- ☒ L.C. File
- ☐ Fictitious Name File
- ☐ Trade/Service Mark
- ☐ Merger File
- ☐ Art. of Amend. File
- ☐ RA Resignation
- ☐ Dissolution / Withdrawal
- ☒ Annual Report / Reinstatement
- ☐ Cert. Copy
- ☐ Photo Copy
- ☐ Certificate of Good Standing
- ☐ Certificate of Status
- ☐ Certificate of Fictitious Name
- ☐ Corp Record Search
- ☐ Officer Search
- ☐ Fictitious Search
- ☐ Fictitious Owner Search
- ☐ Vehicle Search
- ☐ Driving Record
- ☐ UCC 1 or 3 File
- ☐ UCC 11 Search
- ☐ UCC 11 Retrieval

Signature

Requested by:

Name

Date

Time

*W* *8/15* *11:00*

**ARTICLES OF ORGANIZATION  
OF  
SHORELINE DEVELOPMENT CONSULTANTS, L.L.C.  
a Florida Limited Liability Company**

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**ARTICLE I. Name**

The name of the Limited Liability Company is: **SHORELINE DEVELOPMENT CONSULTANTS, L.L.C.**

**ARTICLE II. Address**

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

**37 Oscar Hill Road  
Tarpon Springs, FL 34689**

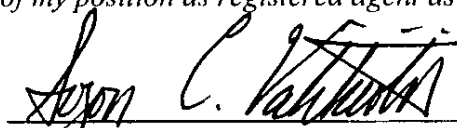
**ARTICLE III.**

**Registered Agent, Registered Office, & Registered Agent's Signature**

The name and the Florida street address of the registered agent are:

**Sozon C. Vatikiotis  
2323 South Florida Avenue  
Lakeland, FL 33803**

*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.*



**Sozon C. Vatikiotis**  
Registered Agent's Signature


#### ARTICLE IV. Management

The Limited Liability Company is to be managed by managers and is, therefore, a members-managed company. The name, mailing address, and street address of each such person who is to serve as member is:

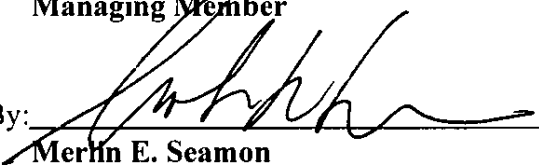
**Costa S. Vatikiotis**  
**37 Oscar Hill Road**  
**Tarpon Springs, FL 34689**

**Merlin E. Seamon**  
**37 Oscar Hill Road**  
**Tarpon Springs, FL 34689**

Dated: August 11, 2008.

By:   
**Costa S. Vatikiotis**  
**Managing Member**

Dated: August 11, 2008.

By:   
**Merlin E. Seamon**  
**Managing Member**