

LOG0000 20279

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

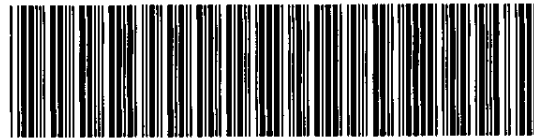
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



000144471480

03/02/09--01006--006 **155.00

RECEIVED

09 MAR -2 AM 10:34

SECRETARY OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

FILED

09 MAR -2 PM 1:35

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

B. KOHR

MAR -2 2009

EXAMINER



UCC FILING & SEARCH SERVICES, INC.
1574 Village Square Blvd Ste 100
Tallahassee, Florida 32309
(850) 681-6528

HOLD
FOR PICKUP BY
UCC SERVICES
OFFICE USE ONLY

March 2, 2009

CORPORATION NAME (S) AND DOCUMENT NUMBER (S):

Gulf Coast Insurance of Lee County LLC

Filing Evidence

- ☐ Plain/Confirmation Copy
- ☒ Certified Copy

Retrieval Request

- ☐ Photocopy
- ☐ Certified Copy

Type of Document

- ☐ Certificate of Status
- ☐ Certificate of Good Standing
- ☐ Articles Only
- ☐ All Charter Documents to Include Articles & Amendments
- ☐ Fictitious Name Certificate
- ☐ Other

NEW FILINGS	
	Profit
	Non Profit
X	Limited Liability
	Domestication
	Other

AMENDMENTS	
	Amendment
	Resignation of RA Officer/Director
	Change of Registered Agent
	Dissolution/Withdrawal
	Merger

FILED
09 MAR -2 PM 1:35
TALLAHASSEE, FLORIDA
SECRETARY OF STATE

OTHER FILINGS	
	Annual Reports
	Fictitious Name
	Name Reservation
	Reinstatement

REGISTRATION/QUALIFICATION	
	Foreign
	Limited Liability
	Reinstatement
	Trademark
	Other

**Articles of Organization
For
Gulf Coast Insurance of Lee County LLC
Florida Limited Liability Company**

ARTICLE I - Name:

The name of the Limited Liability Company is Gulf Coast Insurance of Lee County LLC

ARTICLE II - Address:

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

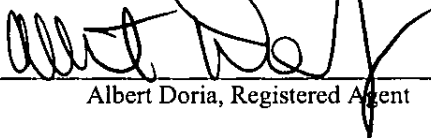
12995 S. Cleveland Ave.
Suite 65
Fort Myers, FL 33907

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

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

Albert Doria
7795 Davis Blvd.
Suite 205
Naples, FL 34104

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.


Albert Doria, Registered Agent

ARTICLE IV - Management:

The Limited Liability Company is to be managed by the managers and the name(s) and address(es) of the managing manager(s) is/are:

Jack Delago
8956 Falcon Pointe Loop
Fort Myers, FL 33912

D2 Investments, LLC
7795 Davis Blvd. Suite 205
Naples, FL 34104


Meghan Record, Organizer

FILED
09 MAR -2 PM 1:35
TALLAHASSEE, FLORIDA