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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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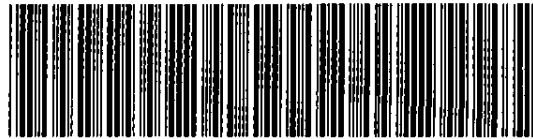
(Business Entity Name)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

W1-16348

J. BRYAN

APR 13 2009

EXAMINER

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: SEA SIDE, 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:

K. RAY PINKSTAFF

Name of Person

K. RAY PINKSTAFF, ATTORNEY AT LAW

Firm/Company

PO BOX 31408

Address

KNOXVILLE, TN 37930

City/State and Zip Code

RAY@PINKSTAFFLAW.COM

E-mail address: (to be used for future annual report notification)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

For further information concerning this matter, please call:

K. RAY PINKSTAFF

Name of Person

at (865) **690-7010**

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

April 2, 2010

K. RAY PINKSTAFF
K. RAY PINKSTAFF, ATTORNEY AT LAW
PO BOX 31408
KNOXVILLE, TN 37930

SUBJECT: SEA SIDE, LLC
Ref. Number: W10000016348

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10 APR 12 AM 11:38
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

We have received your document for SEA SIDE, LLC and your check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity. Section 608.406, Florida Statutes, was amended effective July 1, 2007, to require the name of a limited liability company to be distinguishable from the names of all other filings filed with the Division of Corporations, except for fictitious name registrations and general partnership registrations.

Please select a new name and make the correction in all the appropriate places. One or more words may be added to make the name distinguishable from the one presently on file. Adding of Florida or Florida to the end of the name is not acceptable. A search for name availability can be made on the Internet through the Division's records at www.sunbiz.org.

Please note the name of a limited liability company must end with the words Limited Liability Company, the abbreviation L.L.C., or the designation LLC. The word Limited may be abbreviated as Ltd. and the word Company may be abbreviated as Co. The following suffixes are no longer acceptable: Limited Company, L.C., and LC.

The document number of the name conflict is #T00641, SEASIDE.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6043.

Joey Bryan
Regulatory Specialist II

Letter Number: 110A00008128

K. RAY PINKSTAFF, P.C.

ATTORNEYS AT LAW

FIVE HANNA PLACE OFFICE PARK, SUITE 6000

PO Box 31408

KNOXVILLE, TENNESSEE 37930-1408

FACSIMILE (865) 690-7806

K. RAY PINKSTAFF

WRITER'S DIRECT DIAL
(865) 690-7430

April 9, 2010

Florida Secretary of State
Registration Section
Division of Corporations
PO Box 6327
Tallahassee, FL 32314

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10 APR 12 AM 11:38
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

RE: SEASIDE FLORIDA PROPERTIES, LLC
#T00641

Dear Sir:

Pursuant to your instructions, please find enclosed the corrected Articles of Organization for the above-referenced Limited Liability Company.

Please accept this document for filing and return the approved Articles to me at the above listed address. All fees have previously been paid in full.

If you have any questions, please do not hesitate to contact me. Thank you for your assistance in this matter.

Sincerely yours,



K. Ray Pinkstaff

KRP/ajf
Enclosures

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

SEASIDE FLORIDA PROPERTIES, LLC

(Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")

ARTICLE II - Address:

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

Principal Office Address:

3714 N. ROOSEVELT BLVD
KEY WEST, FL 33040

Mailing Address:

16762 E. POINT DRIVE
SUGARLOAF KEY, FL 33042

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:

APRIL FARISS

Name

3714 N. ROOSEVELT BLVD

Florida street address (P.O. Box **NOT** acceptable)

KEY WEST

FL 33040

City, State, and Zip

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TALLAHASSEE, FLORIDA

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.


Registered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

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

"MGRM" = Managing Member

KEY WEST, FL 33040

MGRM

KEY WEST, FL 33040

(Use attachment if necessary)

10 APR 12 AM 11:38
SECRETARY OF STATE
TALLAHASSEE FLORIDA

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REQUIRED SIGNATURE:

April Fausse
Signature of a member or an authorized representative of a member.

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

April Fariss
Typed or printed name of signee

\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)