2001

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850) 617-6383

From:

Account Name : M. BURR KEIM COMPANY

Account Number: I19990000242

Phone : (215)563-8113

Fax Number

: (215)977-9386

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. **

Email	Address:	

FLORIDA LIMITED LIABILITY CO. **GULFVIEW 404, LLC**

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$125.00

Electronic Filing Menu Corporate Filing Menu

Help

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

GULFVIEW 404, LLC

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

ARTICLE II - Address:

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

Principal Office Address:

Mailing Address:

530 Gulfview Boulevard, Unit 403 Clearwater Beach, FL 33767

530 Gulfview Boulevard, Unit 403 Clearwater Beach, FL 33767

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:

William Siveter

Name

530 Gulfview Boulevard, Unit 403

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

Clearwater Beach

33767

City, State, and Zip

Having been named as registered agent and to accept service of process for the whove 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)

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<u>Title:</u> "MGR" = Manager	Name and Address:	
"MGRM" = Managing Member		
MGRM	William Siveter	
	530 Gulfview Boulevard, Unit 403	•
	Clearwater Beach, FL 33767	
		•
		•
		•
		,
		,
(Use attachment if necessary)		
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Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent 5 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)

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constitutes a third degree felony as provided for in s.817.155, F.S.)

William Siveter Typed or printed name of signec