

L11000121501

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(Business Entity Name)

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OCT 25 2011

EXAMINER



200213490952

10/24/11--01013--022 **160.00

EFFECTIVE DATE

10/17/2011

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
11 OCT 24 AM 9:59

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: BAYSHORE LANDINGS 27, LLC
Name of Limited Liability Company

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
11 OCT 24 AM 9:59

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

EFFECTIVE DATE 10/17/2011

ESPERANZA RACA ZA

Name of Person

Firm/Company

5228 HAMPTON BEACH PL

Address

TAMPA FL 33609

City/State and Zip Code

jaybracaza@gmail.com

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

For further information concerning this matter, please call:

ESPERANZA RACA ZA

Name of Person

at (847) 660 - 3256

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

EFFECTIVE DATE 10/17/2011

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

BAYSHORE LANDINGS 27, 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:

5228 HAMPTON BEACH PL
TAMPA FL 33609

Mailing Address:

5228 HAMPTON BEACH PL
TAMPA FL 33609

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:

ESPERANZA RACA ZA

Name

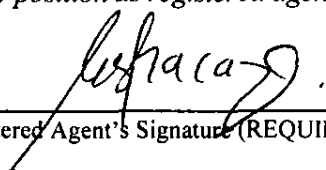
5228 HAMPTON BEACH PL

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

TAMPA FL 33609

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


Registered Agent's Signature (REQUIRED)

(CONTINUED)

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

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

Title:

"MGR" = Manager

"MGRM" = Managing Member

Name and Address:

MGR

ESPERANZA RACAHA

5228 HAMPTON BEACH PL

TAMPA FL 33609

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: OCTOBER 17, 2011 (OPTIONAL)
(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

REQUIRED SIGNATURE:



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. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)

ESPERANZA RACAHA

Typed or 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)