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SECRETARY OF STATE
ALL ARASSES FLORIES

D. BRUCE

NOV 21 2011

EXAMINER

COVER LETTER

| TO: Registration Division of | n Section Corporations | | | | | | |
|------------------------------|---------------------------------------------------------------------------------------------------|------------------------------------|-------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------|--------------------|-----------------|------|
| SUBJECT: Ed E | Brown's Beachside | | | | | | |
| | Name of Limit | ed Liability Co | mpany | | | | |
| The enclosed Articles | s of Organization and fee(s) are | submitted for fi | ling. | | | | |
| Please return all corre | espondence concerning this mat | ter to the follow | ring: | | | | |
| Susan F | P. Brown, Esq. | N/ | | | | _ | |
| | | Name of Person | | | | | |
| ···· | | Firm/Company | | | | _ | |
| 754 84- | Dalam | ,, | | | | | |
| 751 MO | naco Drive | Address | | | | | |
| | | Address | | | LA CR | - - | ~ |
| Punta Go | rda, FL 33950 | | | | SA | _ | |
| shrown@ | | y/State and Zip C | îode | | 3335 7.78 | CO) | |
| SDIOWII@ | dmathewslaw.com E-mail address: (to be used) | for future annual | report notification |) | - <u>17</u> 5 | <u>⊐ë</u> (D | 7 |
| For further information | on concerning this matter, please | e calt: | | | TATE | NOV 18 PM 5: 29 | |
| Susan Brown | | at (239 | , 443-903 | 5 | | | |
| Nan | ne of Person | Area C | ode & Daytime T | elephone Number | | | |
| Enclosed is a check | for the following amount: | | | | | | |
|]\$125.00 Filing Fee | \$130.00 Filing Fee & Certificate of Status | Certified | iting Fee & Copy copy is enclosed) | \$160.00 Fil Certificate of Certified Co (additional co | of Status & opy | | |
| | Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 | Regist Divisi Clifto 2661 | t/Courier Addre tration Section ion of Corporation Building Executive Cente hassee, FL 32301 | ons r Circle | | | |

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

| A | RT | CI | F | T _ | Nο | mo. |
|---|----|------|-----|-----|-----|-----|
| А | кі | 11.1 | JP. | 1 - | INA | me: |

The name of the Limited Liability Company is:

Ed Brown's Beachside Gallery, 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: | Mailing Address: | | |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------|--------------|------------|
| 751 Monaco Drive | c/o Susan P. Brown, Esq. | <u> </u> | |
| Punta Gorda, FL 33950 | 12590 Whitehall Drive, Ste. 1 | | |
| (temporary address, until gallery location secured) | Fort Myers, FL 33907 | | |
| ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Regist business entity with an active Florida registration.) The name and the Florida street address of the registration Susan P. Brown, Esq. | tered Agent. You must designate an individual or registered agent are: | I NOV 18 PM | |
| Name | | CO CR | \bigcirc |
| 12590 Whitehall I | Drive, Suite 1 | TATE ORID | |
| Florida street add | dress (P.O. Box <u>NOT</u> acceptable) | ₽ | |
| Fort Myers | _{FL} 33907 | | |
| City, St | ate, 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)

Page 1 of 2

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

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

| <u>Title:</u> "MGR" = Manager "MGRM" = Managing | Name and Address: Member |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------|
| MGR | Edward N. Brown 751 Monaco Drive Punta Gorda, FL 33950 |
| MGR | Susan P. Brown 751 Monaco Drive Punta Gorda, FL 33950 |
| | n/a SEE, FL |
| | n/a SA |
| The Tare I | |
| (Use attachment if nece | ssary) |
| LE V: Effective date, if fective date, if | other than the date of filing: (OPTIO e date must be specific and cannot be more than five business (ling.) URE: |
| CLE V: Effective date, if ffective date is listed, the days after the date of final states of the st | other than the date of filing: (OPTIO e date must be specific and cannot be more than five business (ling.) URE: |
| CLE V: Effective date, if ffective date is listed, the days after the date of final states of the st | other than the date of filing: |

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)