

L 12000161320

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

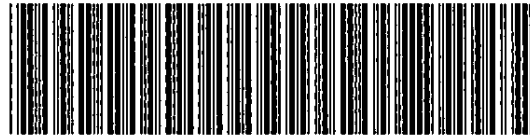
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Sent by Fed-X 12-28-12 48

Office Use Only



200242228102

12/21/12--01031--010 **155.00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2012 DEC 21 AM 8:20

FILED

J. SAULSBERRY
EXAMINER
DEC 28 2012

(850) 245-6051.

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: 1230 Gulf Holdings, 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:

David J. DePinto, Esq.

Name of Person

DePinto Law Associates, P.C.

Firm/Company

445 Broad Hollow Road, Suite 230

Address

Melville, New York 11747

City/State and Zip Code

ddepinto@depintolawpc.com

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

For further information concerning this matter, please call:

David J. DePinto, Esq. at 631 249-8200

Name of Person

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

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2012 DEC 21 AM 8:20

FILED

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY**ARTICLE I - Name:**

The name of the Limited Liability Company is:

1230 Gulf Holdings, 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:1540 Gulf Boulevard, Unit #1406
Clearwater, Florida 33767**Mailing Address:**3 Albertson Lane
Old Westbury, New York 11568**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:

Fakhry Younan Alexander

Name

1540 Gulf Boulevard, Unit #1406Florida street address (P.O. Box **NOT** acceptable)ClearwaterFL33767

City, State, and Zip

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2012 DEC 21 AM 8:20

FILED

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.

X Fakhry Y Alexander

Registered Agent's Signature (REQUIRED)

FAKHRY YOUNAN ALEXANDER

(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:

MGRM

Fakhry Younan Alexander

3 Albertson Lane

Old Westbury, New York 11568

MGRM

Marcelle Matta Morcos

3 Albertson Lane

Old Westbury, New York 11568

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: _____ (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:

Fakhry Y. Alexander

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.)

Fakhry Younan Alexander

Typed or printed name of signee

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)

2012 DEC 21 AM 8:20
FILED
TALLAHASSEE, FLORIDA
SECRETARY OF STATE