

Florida Department of State

Division of Corporations
Electronic Filing Cover Sheet

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(((H13000140044 3)))



H130001400443ABCR

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To:

Division of Corporations
Fax Number : (850) 617-6383

From:

Account Name : FASTKIT CORP
Account Number : 120100000009
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****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****
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FLORIDA LIMITED LIABILITY CO.
BEACH COTTAGES, LLC

Certificate of Status	0
Certified Copy	1
Page Count	02
Estimated Charge	\$155.00

RECEIVED
13 JUL -2 PM 2:31
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TALLAHASSEE, FLORIDA

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13 JUL -2 PM 8:17
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Corporate Filing Menu

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K. SALY
EXAMINER

JUL - 3 2013



June 25, 2013

FLORIDA DEPARTMENT OF STATE
Division of Corporations

FASTKIT CORP

SUBJECT: BEACH COTTAGES, LLC
REF: W13000036478

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The name designated in your document is distinguishable on our records. However, the name is similar to a name already on file with this office. Therefore, the use of this name may result in future complications. The name of the existing entity is : BEACH COTTAGE LLC, document number L04000059018.

You may 1.) resubmit the document under the current name; or 2.) choose to file under another name. If you choose to file under another name, please make the appropriate correction throughout the document(s).

If you have any questions concerning the filing of your document, please call (850) 245-6870.

Karen A Saly
Regulatory Specialist II

FAX Aud. #: H13000140044
Letter Number: 113A00015796

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P.O BOX 6327 - Tallahassee, Florida 32314

ARTICLES OF ORGANIZATION
OF
Beach Cottages of Manasota Key, LLC.

FILED
13 JUL -2 AM 8:17
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE I

The name of the Limited Liability Company is Beach Cottages of Manasota Key, LLC.

ARTICLE II

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

Principal Office Address:

18146 South Petoskey Circle
Port Charlotte, Florida 33948

Mailing Address:

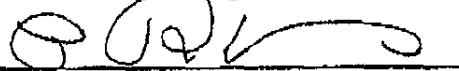
18146 South Petoskey Circle
Port Charlotte, Florida 33948

ARTICLE III

The name and the street address of the registered agent are:

Zofia Rhodes
18146 South Petoskey Circle
Port Charlotte, Florida 33948

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.



Zofia Rhodes
Registered Agent

ARTICLE IV

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

Title:

Manager/Member

Name and Address:

Zofia Rhodes
18146 South Petoskey Circle
Port Charlotte, Florida 33948

The managing member who is designated by the members as the manager shall carry out and further the decisions and actions of the managing member made under the Operating Agreement and shall be authorized to execute any and all reports, forms, instruments, documents, papers, writings, agreements, and contracts, including but not limited to deeds, bills of sale, assignments, leases, promissory notes, mortgages, and security agreements and any other type or form of document by which property or property rights of the Company are transferred or encumbered, or by which debts and obligations of the Company are created, incurred, or evidenced, that are necessary, appropriate, or beneficial to carry out or further those decisions or actions.

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

Dated: June 6, 2013



Zofia Rhodes