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SECRETARY OF STATE

K. SALY EXAMINER

...u - 9 2013

(850) 245-6051.

COVER LETTER

	stration Section sion of Corporations
SUBJECT:	COAStal Contracting of Florida L.L. C 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:
R	onald J Catewood Name of Person
Co	3astal Contracting of Florida L. L. C
13	347/ Fern Trail Drive
<u>n.</u> J.	Fort Myers Florida 33903 City/State and Zip Code OR GOLDENOOD 5.0 @ Gmail.com E-mail address: (to be used for future annual report notification)
For further in	formation concerning this matter, please call:
honai	Name of Person at (239), 633-7872 Area Code & Daytime Telephone Number
Enclosed is	a check for the following amount:
□\$ 125.00 Fil	ing Fee \$\ \text{130.00 Filing Fee & Certificate of Status} \ \ \text{Certified Copy (additional copy is enclosed)} \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
	Mailing AddressStreet/Courier AddressRegistration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 - Name: The name of the Limited Liability Company is:
Coastal Contracting of Florida L.L.C. (Must end with the words "Limited Liability Company, "L.L.C.," or "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:
411 NE 3'd avenue 1347/ Fern Trail Orive Cape Coral, Florida 1, Fort Physis, Florida 33909 33903
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: **Proposition** **Pr
Florida street address (P.O. Box NOT acceptable) 1. Fort Myers FL 33903 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)

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:

Title:	Name and Address:
"MGR" = Manager "MGRM" = Managing Member	
MOR	Ronald J. Catewood 1347/ Fern Trail Drive
MORM	N. Fort Myers Fl. 33903 Shelby J Gatewood 13471 Fein Trail Drive N. Fort Myers FL 33903
(Use attachment if necessary)	
	ne date of filing: (OPTIONAL)
an effective date is listed, the date mu or to or 90 days after the date of filing.)	st be specific and cannot be more than five business d

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.)

d J. Gatewood

Typed or printed name of signed

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)