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TSCHROFDER



FLORIDA DEPARTMENT OF STATE Division of Corporations

April 23, 2015

MELISSA T. GILREATH 101 PALMERA CT PONTE VEDRA BEACH, FL 32082 US

SUBJECT: FIRST COAST INVESTMENTS, LLC

Ref. Number: W15000028622

10: 00: HW S- AWA ST

We have received your document for FIRST COAST INVESTMENTS, LLC and your check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all the appropriate places. One or more words may be added to make the name distinguishable from the one presently on file. A search for name availability can be made on the Internet through the Division's records at www.sunbiz.org.

Please note the name of a limited liability company must contain the words "Limited Liability Company," the abbreviation "L.L.C.", or the designation "LLC". The following suffixes are no longer acceptable: "Limited Company," "L.C.," "Ltd.," and "Co."

The document number of the name conflict is P92000008985 (FIRST COAST INVESTMENTS, INC.).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Terri J Schroeder Regulatory Specialist II

Letter Number: 515A00008258

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: FIRST COAST IN Name of Lim	VESTMENTS, LLC ited Liability Company
The enclosed Articles of Organization and fee(s) are	e submitted for filing.
Please return all correspondence concerning this ma	atter to the following:
MELISSA T. GILR	EATH
	Name of Person
FIRST COAST IN	VESTMENTS LLC
FIRST COAST IN	Firm/Company
101 PALMER	A COURT Address
	Ty/State and Zip Code
FIRSTCOAST I NVEST E-mail address: (to be used	for future annual report notification)
For further information concerning this matter, plea	se call:
MELISSA T GURARH	904 . 234 8319
MELISSA T. GILREATH at (Area Code Daytime Telephone Number
Enclosed is a check for the following amount:	
□ \$125.00 Filing Fee \$\sum \text{\$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	Street/Courier Address
Registration Section Division of Corporations	Registration Section Division of Corporations
P.O. Box 6327	Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

Tallahassee, FL 32314

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

AR	m	С	LE	I	-	Na	me:
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The name of the Limited Liability Company is:

FIRST COAST INVESTMENT ASSOCIATES, 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:
101 Palmera Court	101 Palmera COURT
PONTE VEDBA BEACH,	PONTE VEDRA BEACH FL
FL 32082	32082

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:

MELISSA T. GIL	REATH
Name	
101 Palmera	Court
Florida street address (P.O. Box NO	T acceptable)
Ponte Vedra Beach	FL 32082
City	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 605, F.S..

Registered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

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<u>Title:</u> "AMBR" = Authorized Member "MGR" = Manager	Name and Address:
AMBR	MELISSA T. GILR CATH 101 PALMERA COURT PONTE VEDRA BEACH, FL 3208.
AMBR	MARIANNE BARNETT 1766 LOQUAT LANE JACKSONIUL, EL. 32224
(Use attachment if necessary)	
ective date is listed, the date must be s of filing.)	ate of filing: (OPTIONAL) specific and cannot be more than five business days prior to or 90 days
ective date is listed, the date must be sof filing.) E VI: Other provisions, if any.	tte of filing: (OPTIONAL) specific and cannot be more than five business days prior to or 90 da
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REQUIRED SIGNATURE: Signature of a m (In accordance with section of constitutes an affirmation un I am aware that any false infoconstitutes a third degree feld	nember or an authorized representative of a member. 605.0203 (1) (b), Florida Statutes, the execution of this document der the penalties of perjury that the facts stated herein are true. ormation submitted in a document to the Department of State ony as provided for in s.817.155, F.S.)
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ARTICLE IV-