L15000103252

(Re	equestor's Name)	
(Ad	ldress)	
(Ad	idress)	
(Cit	ty/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	ısiness Entity Naı	me)
(Do	ocument Number))
Certified Copies	_ Certificate	s of Status
Special Instructions to	Filing Officer:	
,		

Office Use Only



200272746442

200272746442 05/18/15--01036--011 **125.00

> 2015 JUN II AH SE IS SECRETARY OF STATE TALLAHASSEE, FLONGE

7015 BIN II AH OR I

JUN 16 2015

Y SULKER

W15-36408

MAY 2 2 2015

Y SULKER



May 22, 2015

JOHN W SCHNEIDER III 106 50TH STREET COURT NORTHWEST BRADENTON, FL 34209

SUBJECT: GULF COAST CONSTRUCTION, LLC

Ref. Number: W15000036408

We have received your document for GULF COAST CONSTRUCTION, LLC and your check(s) totaling \$125.00. 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.," "LC.," "Ltd.," and "Co."

The document number of the name conflict is G30996 GULF COAST CONSTRUCTION, 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.

Yasemin Y Sulker Regulatory Specialist II

Letter Number: 215A00010874

06/03/15

Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314

RECEIVED

15 JUN 11 PM 2:59

SECRETARY OF STATE TALLAHASSEE, FLORIDA

Dear Sir,

Here as my REVISED application for establishing my limited liability company. This also includes the articles of organization.

John W. Schneider III 106⁻50th Street Court NW Bradenton, FL 34209

941-773-1239

After further review please feel free to contact me at your convenience.

Sincerely,

John W. Schneider III

COVER LETTER

	egistration Sivision of C						
eup ie ca		Contractors, LLC					
SUBJECT	· •	Name of Lin	mited Liabil	ity Company		_	
The enclos	sed Articles o	of Organization and fee(s) as	re submitted	for filing.			
Please retu	ırn all corresj	ondence concerning this m	atter to the f	ollowing:			
	John W. So	chneider III					
	-		Name of	Person			
	Coastline C	Contractors, LLC					
			Firm/Co	mpany			
	106 50th S	treet Court Northwest					
			Addr	ess			
	Bradenton,	Florida 34209				enders, pl	
	Table at a 2.1		City/State and	d Zip Code		71.L) ;
	Jackschneid	er3@gmail.com E-mail address: (to be used	l for fisture a	nnual ranget natificat	ion)		~
For further i	nformation c	oncerning this matter, pleas		imuai report notriicat	ion <i>)</i>	CUID JUN	fac esa
			41	7731239		AF STA	
	Nar		rea Code	Daytime Telephon	e Number	29	•
Enclosed is	s a check for	the following amount:					
\$125.00 Fi	iling Fee	\$130.00 Filing Fee & Certificate of Status	Certific	0 Filing Fee & ed Copy al copy is enclosed)	Certified (e of Status &	1)
		ng Address		Street Address			

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:				
The name of the Limited Liabili	ly Company is:			
				·
Coastline Contractor				
(Must end	with the words "Limited	l Liability Compan	y, "L.L.C.," or "LLC.")	
ARTICLE II - Address:				
The mailing address and street a	ddress of the principal o	ffice of the Limited	d Liability Company is:	
n. t t	-1.066 A.J.J.		B# - 111 A .J.J	
Princip	al Office Address:		Mailing Addre	ess:
106 50TH STREET	COURT NW	<u>SA</u>	ME	
BRADENTON, FL				
34209				
ARTICLE III - Registered Ag	ent, Registered Office,	& Registered Age	ent's Signature:	
(The Limited Liability Company			You must designate an ind	lividual or
another business entity with an	active Florida registratio	n.)		
The name and the Florida street	address of the registered	l agent are:		
	JOHN W. SCHNEID	ER III		
		Name		
	106 50TH STREET	COURTNW		
	Florida street address		accentable)	
	1 ioitaa biioot adai os	(1.10, 20, <u>1.01</u>)	,	
	BRADENTON	FL	34209	
	City	State	Zip	
Having been named as registered (agent and to accept servi	ice of process for th	e ahove stated limited liahii	lity company at the
place designated in this certificate,				
further agree to comply with the pr				
am familiar with and accept the ob	ligations of my position	as registered agent	as provided for in Chapter	605, F.S.≥
	//9/			7/55
	Ma	100	Harry	The state of the s
	Registe	ered Agent's Signa	ture (REQUIRED)	(b) 27
	V	(CONTINUED)		7 B M
		· · · · · · · · · · · · · · · · · · ·		8 C
		Page 1 of 2		
				- :

Title: "AMBR" = Authorized Member "MGR" = Manager	Name and Address:
MGR	JOHN W. SCHNEIDER III
	106 50TH STREET COURT NW
	BRADENTON, FL 34209
EV: Effective date, if other than ctive date is listed, the date mu filing.)	•
ctive date is listed, the date mu f filing.)	et be specific and cannot be more than five business days prior to or 90
EV: Effective date, if other than ctive date is listed, the date muffiling.) the date inserted in this block donent's effective date on the Dep EVI: Other provisions, if any.	et be specific and cannot be more than five business days prior to or 90
EV: Effective date, if other than ctive date is listed, the date must filing.) the date inserted in this block donent's effective date on the Dep EVI: Other provisions, if any.	es not meet the applicable statutory filing requirements, this date will not return of State's records.
EV: Effective date, if other than ctive date is listed, the date must filing.) the date inserted in this block donent's effective date on the Dep EVI: Other provisions, if any. REOUIRED SIGNATURE: Signature (In accordance veconstitutes an af	es not meet the applicable statutory filing requirements, this date will not retirement of State's records. Of a member or an authorized representative of a member. ith section 605.0203 (1) (b), Florida Statutes, the execution of this docume firmation under the penalties of perjury that the facts stated herein are true.
EV: Effective date, if other than ctive date is listed, the date must filing.) the date inserted in this block donent's effective date on the Dep EVI: Other provisions, if any. REOUIRED SIGNATURE: Signature (In accordance veconstitutes an af I am aware that it	es not meet the applicable statutory filing requirements, this date will not retirement of State's records. Of a member or an authorized representative of a member. This document in section 605.0203 (1) (b), Florida Statutes, the execution of this document mation under the penalties of perjury that the facts stated herein are true my false information submitted in a document to the Department of State degree felony as provided for in s.817.155. F.S.)
EV: Effective date, if other than ctive date is listed, the date must filing.) the date inserted in this block donent's effective date on the Dep EVI: Other provisions, if any. Signature (In accordance veconstitutes an af I am aware that a constitutes a thir	es not meet the applicable statutory filing requirements, this date will not retirement of State's records. Of a member or an authorized representative of a member. Colorist section 605.0203 (1) (b), Florida Statutes, the execution of this docume irmation under the penalties of perjury that the facts stated herein are true my false information submitted in a document to the Department of State degree felony as provided for in s.817.155, F.S.)
EV: Effective date, if other than ctive date is listed, the date must filing.) he date inserted in this block do nent's effective date on the Dep EVI: Other provisions, if any. REOUIRED SIGNATURE: Signature (In accordance vonstitutes an af I am aware that constitutes a thir	es not meet the applicable statutory filing requirements, this date will not retirement of State's records. Of a member or an authorized representative of a member. Control of this document of the section 605.0203 (1) (b), Florida Statutes, the execution of this document in the penalties of perjury that the facts stated herein are true in the section submitted in a document to the Department of State is degree felony as provided for in s.817.155, F.S.)