

L1500017583

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

**Note: Please print this page and use it as a cover sheet.** Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H15000183931 3)))



H150001839313ABC+

**Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page.** Doing so will generate another cover sheet.

To: Division of Corporations  
Fax Number : (850) 617-6381

From: Account Name : THE LAW OFFICES OF NICK SPRADLIN  
Account Number : I20070000020  
Phone : (813) 435-3176  
Fax Number : (713) 429-1276

**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\***

Email Address: \_\_\_\_\_

FILED  
15 JUL 29 AM 8:31  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FLORIDA LIMITED LIABILITY CO.  
Costa property holdings, LLC

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$125.00

RECEIVED  
15 JUL 29 PM 1:40  
TALLAHASSEE, FLORIDA

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Costa property 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:

100 Bayview Dr Suite 231  
Sunny Isles Beach, FL 33160

Mailing Address:

100 Bayview Dr Suite 231  
Sunny Isles Beach, FL 33160

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:

THE LAW OFFICES OF NICK SPRADLIN, PLLC

Name

2202 N. WEST SHORE BLVD. #200

Florida street address (P.O. Box **NOT** acceptable)

TAMPA

FL

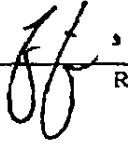
33607

City

State

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

FILED

15 JUL 29 AM 8:31

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLE IV-**

The name and address of each person authorized to manage and control the Limited Liability Company:

**Title:**

"AMBR" = Authorized Member

"MGR" = Manager

MGR

**Name and Address:**

Robert Gibbonsmeyers

100 Bayview Dr Suite 231

Sunny Isles Beach, FL 33160

MGR

Lisa G. Sherwood

100 Bayview Dr Suite 231

Sunny Isles Beach, FL 33160

MGR

Robert W. Sherwood

100 Bayview Dr Suite 231

Sunny Isles Beach, FL 33160

MGR

Blue Surf Adventures LLC

100 Bayview Dr Suite 231

Sunny Isles Beach, FL 33160

(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.)

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

**ARTICLE VI:** Other provisions, if any.

**REQUIRED SIGNATURE:**

  
Signature of a member or an authorized representative of a member.

This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes.  
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.

NICKOLAS J. SPRADLIN, AUTHORIZED REPRESENTATIVE

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)

ATTACHMENT

ARTICLE IV (CONTINUED)

MGR: Blue Surf Sanctuary LLC

100 Bayview Dr Suite 231 Sunny Isles Beach, FL 33160

FILED

15 JUL 29 AM 8:31

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA