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9-14-15

2015 SEP 21 PH I2: OF STATE

• SEP 2 8 2015 T. BROWN

COVER LETTER

10: Registration Section Division of Corporations
SUBJECT: SEMINOLE BEACH LLC.
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:
GOZHAN YKMAZ Name of Person
Name of Person
SEMINOLE BEACH LLC. Firm/Company
Firm/Company
1680 HARBOR CLUB DRIVE Address
City/State and Zip Code 90khan yr/ma z 1020 @ gmail. com E-mail address: (to be used for future annual report notification)
City/State and Zip Code
90khan 41/mg 2 1020 Q. 9mgil, com
. E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Gokhan Yilmaz at (850) 716-9623
Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
\$125.00 Filing Fee \$130.00 Filing Fee & Certificate of Status Certified Copy (additional copy is enclosed) \$160.00 Filing Fee, Certified Copy (additional copy is enclosed)
Mailing AddressStreet AddressNew Filing SectionNew Filing SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability	Company is:			2015 SEP 21 PH 12: 05
SE	MINOLE B	EACH L	'LC	TALECRE 21 PM.
			ny, "L.L.C.," or "LLC.")	12:05
ARTICLE II - Address: The mailing address and street add	ress of the principal offi	ice of the Limit	ed Liability Company is:	ALLAHARY OF STATE OF STATE
<u>Principal</u>	Office Address:		Mailing Add	lress:
1680 Horbor Club	b Arie Talkhouse,	9.3298 <u> </u>	1680 Herber Cle Tallohusoe, FL	16 Orive
ARTICLE III - Registered Agent (The Limited Liability Company ca another business entity with an act The name and the Florida street ad-	annot serve as its own R tive Florida registration. dress of the registered a	egistered Agen) gent are:	. You must designate an i	effective Date 9-14-15
	_ SOKAM	Y/maz Name		
	1680 Harbor Florida street address (<i>Club</i> P.O. Box NOT	occeptable)	
	Tallahousee	FL	32.208	
-	City	State	32,308 Zip	
Having been named as registered age place designated in this certificate, I i further agree to comply with the prov Im familiar with and accept the oblig	hereby accept the appointions of all statutes rela	ntment as regist ting to the prop registered ager	ered agent and agree to ac er and complete performa	t in this capacity. I nce of my duties, and I

Page 1 of 2

(CONTINUED)

Title: "AMBR" = Author		Name and Address:
"MGR" = Manage		1680 Harber Club Nive
		Tallahassee, FC 32308

(Use attachment if	nanaccomi	
(Use attachment if		alulans
CLE V: Effective date	, if other than the date of filing	: <u>9/14/2015</u> (OPTIONAL) Id cannot be more than five business days prior to or 90 da
CLE V: Effective date ffective date is listed e of filing.)	, if other than the date of filing the date must be specific an	d cannot be more than five business days prior to or 90 da
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