

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.

((H16000079642 3)))



H160000796423ABC2

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 : CORP USA
Account Number : 072450003255
Phone : (305) 634-3694
Fax Number : (305) 633-9696

RECEIVED

16 MAR 31 PM 4:59

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

RECEIVED

16 MAR 30 PM 7:59

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

Email Address: _____

FLORIDA LIMITED LIABILITY CO.

WEST COAST ENTERTAINMENT GROUP LLC

Certificate of Status	0
Certified Copy	1
Page Count	04
Estimated Charge	\$155.00

108677

Please see day fax
on the was
that 3/30/16

Electronic Filing Menu

Corporate Filing Menu

Help

re-fax
3/31/16

MAR 31 2016

S. GILBERT



March 31, 2016

FLORIDA DEPARTMENT OF STATE
Division of Corporations

CORP USA

SUBJECT: WEST COAST ENTERTAINMENT GROUP LLC
REF: W16000023883

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The document submitted does not meet legibility requirements for electronic filing. Please do not attempt to refax this document until the quality has been improved.

Font too small and blurry.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Tim Burch
Regulatory Specialist II

FAX Aud. #: H16000079642
Letter Number: 016A00006579

P.O. BOX 6327 - Tallahassee, Florida 32314

(4)

FILE0000079642

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: West Coast Entertainment Group 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:

Steve Jaipersad

Name of Person

West Coast Entertainment Group LLC

Firm/Company

2100 N. Ocean Blvd., Suite 18D

Address

Ft. Lauderdale, FL 33305

City/State and Zip Code

stevejaipersad@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Steve Jaipersad at 787 607 7070

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

Street/Courier Address
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

FILED
16 MAR 30 PM 7:59

COUNTY OF DADE
TALLAHASSEE, FLORIDA

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

West Coast Entertainment Group 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:

2100 N Ocean Blvd., Suite 180

Ft. Lauderdale, Florida 33305

2100 N Ocean Blvd., Suite 180

Ft. Lauderdale, Florida 33305

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:

Steve Jelpstead

Name

4224 Fox Run Court

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

WESTON

City

FL 33331

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

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:

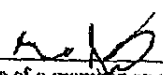
Steve Jaipersad
#224 Fox Run Court
Weston FL 33331

(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.)

ARTICLE VI: Other provisions, if any.

REQUIRED SIGNATURE:


Signature of a member or an authorized representative of a member.
(In accordance with section 605.0203 (1) (b), 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.)

Steve Jaipersad

Typed or printed name of signer

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)