

L16000165052

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

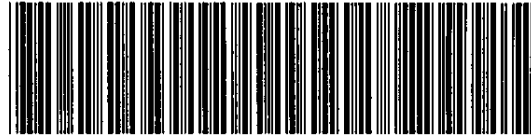
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



300289359453

08/23/16--01029--019 **160.00

FILED
16 AUG 23 AM 9:37
7/24
9/1/16

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Gulf to Highlands, 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:

E. Douglas McIntyre
Name of Person

Gulf to Highlands, LLC
Firm/Company

P.O. Box 1065
Address

ESTERO, FL 33929
City/State and Zip Code

DOUGMCINTYRE1@AOL.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

KAREN MCINTYRE at (239) 218-7858
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

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

Street Address

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

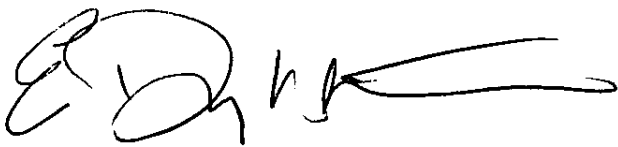
August 22, 2016

New Filing Section

Division of Corporations

I sent in a new filing for Gulf to Highlands, LLC that you will be receiving on Tuesday, afternoon by Federal Express. When it was sent in page 2 was inadvertently left out when making a copy of it the original was left on the photo copier. Attached is the original if you could put this with the package I would appreciate it. Please call me if you have questions. I am enclosing a copy of the filing also for reference.

Thanks,



E. Doug McIntyre

239-314-9009

FILED
16 AUG 23 AM 9:37
SECRETARY OF STATE
TALLAHASSEE FL 32309

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Gulf to Highlands, 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:

10600 Chevrolet Way Suite 212
ESTERO, FL 33928

Mailing Address:

P.O. Box 1065
ESTERO, FL 33929

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:

E. DOUGLAS McIntyre

Name

10600 CHEVROLET Way Suite 212

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

ESTERO FL 33928

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.

E. Douglas McIntyre

Registered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

FILED
16 AUG 23 AM 9:37
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

Name and Address:

MGR

AMBR

E. DOUGLAS McINTYRE
P.O. Box 1065
ESTERO, FL 33929

KAREN J. McINTYRE
P.O. Box 1065
ESTERO, FL 33929

(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:

Karen J. McIntyre

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.

KAREN J. McINTYRE

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)

FILED
16 AUG 23 AM 9:37
SECRETARY OF STATE
TALLAHASSEE, FLORIDA