L 1600196755

,					
(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

T. SCOTT



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COVER LETTER

TO:

Registration Section

· · · a Di	vision of Corporations						
CUDIECT.	Gulf Coast Turnkey Properties						
SUBJECT:	Name of 1	Limited Liabil	ity Company				
The enclose	d Articles of Organization and fee(s)	are submitted	for filing.				
Please retur	n all correspondence concerning this	matter to the	following:				
	Michael Fenton						
		Name of	Person				
	Gulf Coast Turnkey Properties						
	Firm/Company						
	27 Bryant St NW #1A						
,	Address						
	Washington, DC 20001						
N	Aichael.P.Fenton@gmail.com	City/State ar	d Zip Code				
		sed for future	annual report notification)				
For further in	formation concerning this matter, ple	ease call:					
i	Michael Fenton	571	208-5652				
-	Name of Person	Area Code	Daytime Telephone Number				
Enclosed is	a check for the following amount:						
\$125.00 Fil	ing Fee \$130.00 Filing Fee & Certificate of Status	Certif	20 Filing Fee & \$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				

				i I	
ARTICLE	SOF ORGANIZATION FOR	FLORIDA LIM	ITTED LIABILITY COM	IPANY	
RTICLE I - Name:					
he name of the Limited Lial	ility Company is:				
			:		
	ey Properties LLC			i	
(Must e	hd with the words "Limited	Liability Cor	npany, "L.L.C.," or "L	LC.")	
ARTICLE III - Address:					
he mailing address and stree	} et address of the principal o	ffice of the Li	mited Liability Compa	iny is:	
Prin	cipal Office Address:		<u>Mail</u>	ng Address:	
Gulf Coast Turnk	ey Properties		Gulf Coast Turnkey	Properties	
9151 16th Ave C			27 Bryant St NW #1		
Bradenton, FL 34	209		Washington, DC 200	01	
The Limited Liability Comp nother business entity with the name and the Florida str	an active Florida registratio	on.)	gent. You must design	ate an individual or	
	Name				
			ļ	•	
	9151 16th Ave Cir N			·	
	Florida street addres	Florida street address (P.O. Box NOT acceptable)			
	Bradenton	FL	34209	;	
	City	State	Zip	i	
1111	1				
aving been named as register			المحددي ياسيلان	Carl I Dall Dall Co	

Registeréd Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

	Title: "AMBR" = Authorized	i Member	Name and Address:
	"MGR" = Manager	HALLINGE	
	AMBR	-	Michael Fenton 27 Bryant ST NW #1A
			Washington, DC 20001
	MGR	-	Judy Fenton
			9151 16th Ave Cir NW Bradenton, FL 34209
	MGR		Parya Fenton
	1710710	-	27 Bryant St NW #1A
			Washington, DC 20001
		_	
	(Use attachment if nece	essary)	
ARTIC	LEV: Effective date, if a	other than the date of filing:	(OPTIONAL)
(If an ei	ffective date is listed, the	date must be specific and	cannot be more than five business days prior to or 90 days after
	e of filing.) If the data inserted in this	s blook doos not most the s	pplicable statutory filing requirements, this date will not be listed as
		s block does not meet the an the Department of State's	
		•	
the doc	L.F. VI: Other provisions	ifany	
the doc	LE VI: Other provisions,	if any.	
the doc	LE VI: Other provisions,	if any.	

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.

Michael tentori

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)