

1/9/2018

L18000008158Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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

From: Account Name : C T CORPORATION SYSTEM
Account Number : FCA000000023
Phone : (512)418-6949
Fax Number : (954)208-0845

****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.

Florida horizon construction managers LLC

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$125.00

Resubmission keep date 1/5/18

Electronic Filing Menu

Corporate Filing Menu

Help

C RICO**JAN 05 2018**

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: Florida Horizon Construction Managers 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:

Edgar Balbin

Name of Person

Sebastian Waterfront Properties LLC

Firm/Company

2700 Newport Blvd Ste 188

Address

Newport Beach, CA 92663

City/State and Zip Code

lifehase@sbcglobal.net

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

For further information concerning this matter, please call:

Charles Rosenthal

at

949

627-0054

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

2018 JAN -5 PM 1:40

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Florida Horizon Construction Managers LLC

(Must contain 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:4035 Grande Vista Blvd. Unit 133
ST Augustine, FL 32084Mailing Address:4035 Grande Vista Blvd. Unit 133
ST Augustine, FL 32084

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:

Charles L. Rosenblum

Name

4035 Grande Vista Blvd. Unit 133Florida street address (P.O. Box **NOT** acceptable)AugustineFlorida32084

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.

By: 

Registered Agent's Signature (REQUIRED)

(CONTINUED)

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

AMBR

4035 Grande Vista Blvd. Unit 133, ST Augustine, FL 32084

4035 Grande Vista Blvd Unit 133, ST Augustine, FL 32084

ARTICLE VI: Other provisions, if any..

REQUIRED SIGNATURE

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.

Typed or printed name of signee

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)