

L18000084534

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.

((H18000108363 3)))



H18000108363ABC

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 : FASTKIT CORP
Account Number : I20100000009
Phone : (305) 599-0839
Fax Number : (305) 592-9591

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

Email Address: _____

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2018 APR -5 PM 12:08

FILED

FLORIDA LIMITED LIABILITY CO. Suncoast Preparatory Academy, LLC

Certificate of Status	0
Certified Copy	1
Page Count	01
Estimated Charge	\$155.00

RECEIVED

2018 APR -5 PM 3:33

DIVISION OF CORPORATIONS
BUREAU OF COMMERCIAL
INFORMATION SERVICES

Electronic Filing Menu

Corporate Filing Menu

Help

APR 06 2018

T. SCOTT

ARTICLES OF ORIGATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I NAME

The name of the Limited Liability Company is: **Suncoast Preparatory Academy, LLC**

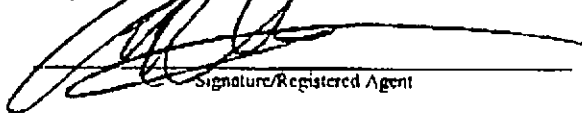
ARTICLE II PRINCIPAL AND MAILING OFFICE ADDRESS

The principal place of business/mailling address is: 11131 Cargo Court
Odessa, FL 33556

ARTICLE III Registered Agent, Registered Office & Registered Agent's Signature:

The name and Florida Street address of the initial registered agent is: Arnold Gwinn
11131 Cargo Court
Odessa, FL 33556

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.


Signature/Registered Agent

4/5/18
Date

FILED
2018 APR -5 PM 12:08
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE IV Manager(s)

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

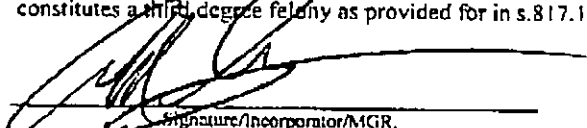
Arnold Gwinn - Manager
11131 Cargo Court
Odessa, FL 33556

ARTICLE V EFFECTIVE DATE

The effective date of this filing:

Immediately upon filing.

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.)


Signature/Incorporator/MGR.
Arnold Gwinn
Printed name of Signee

4/5/18
Date