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(Requestor's Name)

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☐ PICK-UP

☐ WAIT

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\_\_\_\_\_  
(Business Entity Name)

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(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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TALLAHASSEE, FLORIDA

T SCHROEDER

## CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301  
(850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

Coastal Family LLC

Signature \_\_\_\_\_

Requested by: Seth

03/11/19

Name \_\_\_\_\_

Date \_\_\_\_\_

Time \_\_\_\_\_

Walk-In \_\_\_\_\_

Will Pick Up \_\_\_\_\_

\_\_\_\_\_ Art of Inc. File \_\_\_\_\_  
\_\_\_\_\_ LTD Partnership File \_\_\_\_\_  
\_\_\_\_\_ Foreign Corp. File \_\_\_\_\_  
\_\_\_\_\_ L.C. File \_\_\_\_\_  
\_\_\_\_\_ Fictitious Name File \_\_\_\_\_  
\_\_\_\_\_ Trade/Service Mark \_\_\_\_\_  
\_\_\_\_\_ Merger File \_\_\_\_\_  
\_\_\_\_\_ Art. of Amend. File \_\_\_\_\_  
\_\_\_\_\_ RA Resignation \_\_\_\_\_  
\_\_\_\_\_ Dissolution / Withdrawal \_\_\_\_\_  
\_\_\_\_\_ Annual Report / Reinstatement \_\_\_\_\_  
\_\_\_\_\_ Cert. Copy \_\_\_\_\_  
\_\_\_\_\_ Photo Copy \_\_\_\_\_  
\_\_\_\_\_ Certificate of Good Standing \_\_\_\_\_  
\_\_\_\_\_ Certificate of Status \_\_\_\_\_  
\_\_\_\_\_ Certificate of Fictitious Name \_\_\_\_\_  
\_\_\_\_\_ Corp Record Search \_\_\_\_\_  
\_\_\_\_\_ Officer Search \_\_\_\_\_  
\_\_\_\_\_ Fictitious Search \_\_\_\_\_  
\_\_\_\_\_ Fictitious Owner Search \_\_\_\_\_  
\_\_\_\_\_ Vehicle Search \_\_\_\_\_  
\_\_\_\_\_ Driving Record \_\_\_\_\_  
\_\_\_\_\_ UCC 1 or 3 File \_\_\_\_\_  
\_\_\_\_\_ UCC 11 Search \_\_\_\_\_  
\_\_\_\_\_ UCC 11 Retrieval \_\_\_\_\_  
\_\_\_\_\_ Courier \_\_\_\_\_

ARTICLES OF ORGANIZATION

OF

**Coastal Family LLC**

THE UNDERSIGNED, for the purpose of forming a limited liability company under the Florida Revised Limited Liability Company Act, Florida Statutes, Chapter 605 (the "Act"), hereby makes, acknowledges, and files the following Articles of Organization.

ARTICLE I - NAME

The name of the limited liability company shall be **Coastal Family LLC** (hereinafter called "Company"). The principal place of business of the Company in Florida shall be in Brevard County.

ARTICLE II - ADDRESS

The mailing address and street address of the Company's principal office are:

Mailing Address:

P.O. BOX 927  
Sharpes, FL 32959

Street Address:

5175 N. US 1  
Cocoa, FL 32927

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ARTICLE III - DURATION

The Company shall commence its existence on the date these Articles of Organization are filed by the Florida Department of State, and the Company shall exist perpetually unless the Company is dissolved as provided by law or its operating agreement.

ARTICLE IV - PURPOSES AND POWER

The general purpose for which the Company is organized is to: design, construct, own, use, buy, sell, lease, hire, deal in and with articles of property of all kinds, render services of all kinds, and to transact any lawful business for which a limited liability company may be organized under the laws of the State of Florida. The Company shall have all the powers granted to a limited liability company under the laws of the State of Florida.

ARTICLE V - REGISTERED OFFICE AND AGENT

The name and street address of the registered agent of the Company in the State of Florida and principal office is:

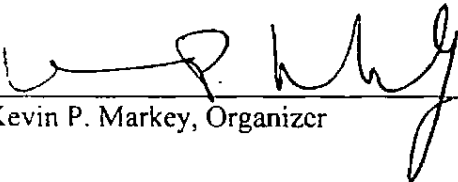
Kevin P. Markey, P.L.  
380 S. Courtenay Pkwy.  
Suite A  
Merritt Island, FL 32952

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ARTICLE VI - MANAGEMENT

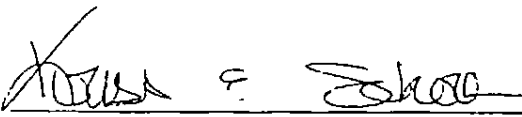
An operating agreement adopted by the members of the Company ~~may~~ contain any provision for the regulation and management of the affairs of the Company not inconsistent with law or these Articles of Organization. Unless the form of management is changed pursuant to law, **the initial manager of the Company shall be Kimberly Angelillo whose address is 5175 N. US 1, Cocoa, FL 32927 who shall serve until such time as the members appoint a successor.**

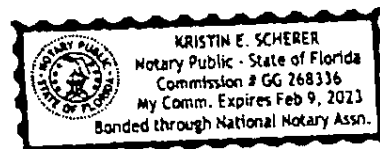
IN WITNESS WHEREOF, the undersigned, being an authorized representative of all of the members of the Company has made and subscribed these Articles of Organization at Merritt Island, Florida, for the foregoing uses and purpose, on March 11, 2019.

  
Kevin P. Markey, Organizer

STATE OF FLORIDA  
COUNTY OF BREVARD

The foregoing instrument was acknowledged before me on March 11, 2019 by Kevin P. Markey, who is ☒ personally known to me or ☐ has produced the following form of identification: \_\_\_\_\_.

  
Notary Public, State of Florida at Large  
Printed Name: Kristin E. Scherer  
Commission No: \_\_\_\_\_  
Commission expires: \_\_\_\_\_



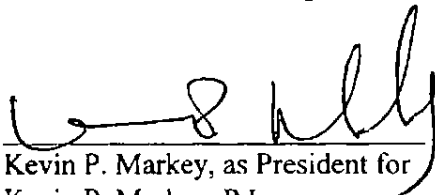
**CERTIFICATE OF DESIGNATION FOR  
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF *FLORIDA STATUTES*, SECTION 605.0113, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the limited liability company is: **Coastal Family LLC**
2. The name and address of the registered agent and office is:

Kevin P. Markey, P.L.  
380 S. Courtenay Pkwy.  
Suite A  
Merritt Island, FL 32952

Having been named as registered agent and to accept service of process of 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 the obligations of my position as registered agent.

  
Kevin P. Markey, as President for  
Kevin P. Markey, P.L.

Date: March 11, 2019

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