5/29/2019

Division of Corporations

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To:

Division of Corporations

Fax Number : (850)617-6381

From:

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Account Name

: PYNE LAW GROUP

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Phone

: (850)215-9090

: (850)215-9045 Fax Number

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

FLORIDA LIMITED LIABILITY CO. Laketown Wharf Salt Life Living LLC

Certificate of Status	0
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Corporate Filing Menu

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	lew Filing Section Division of Corporations	
CUD IE CO	Laketown Wharf Salt Life Living LLC	
SUBJECT		ted Liability Company
The enclos	sed Articles of Organization and fee(s) are	submitted for filing.
Please retu	nrn all correspondence concerning this mat	ter to the following:
	Laura C. Pyne, Esq.	
		Name of Person
	Pyne Law Group, P.A.	
		Firm/Company
	2309 Frankford Avenue	
		Address
	Panama City, FL 32405	
	Cit	y/State and Zip Code
	laurapyne@pynclawgroup.com	
	E-mail address: (to be used f	or future annual report notification)
For further i	nformation concerning this matter, please	call:
	Laura C. Pyne, Esq. 850 at (215-9090
		a Code Daytime Telephone Number
Enclosed is	s a check for the following amount:	
\$125.00 Fi		S155.00 Filing Fee & S160.00 Filing Fee, Certified Copy (additional copy is enclosed) 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

ARTICLES OF ORGANIZATION FOR FEORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:		
The name of the Limited Liability Company is:	1	
Laketown Wharf Salt Life Living LLC		
(Must contain the words "Limited L	iability Compa	ny, "L.L.C.," or "LLC.")
	1	
RTICLE II - Address:		
he mailing address and street address of the principal off	toe of the Limi	ted Liability Company is:
Principal Office Address:		Mailing Address:
9902 Thomas Drive S, Unit 1132	وا	902 Thomas Drive S, Unit 1132
Panama City Beach, FL 32408		anama City Beach, 32408
The Limited Liability Company cannot serve as its own Foother business entity with an active Florida registration	tegistered Age	
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The Limited Liability Company cannot serve as its own Finother business entity with an active Florida registration the name and the Florida street address of the registered at Pyne Law Group, P.A. 2309 Frankford Avenue Florida street address	egistered Age:)	nt. You must designate an individual or

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..

Registered Agent's Signature (REQUIRED)

(CONTINUED)

05/29/2019	11.52	Pyne Law	Groun
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MGR" = Manager MGR Beverly J. Cowart 9902 Thomas Drive S. Unit 1132 Panama City Beach, FL 32408 William E. Cowart 9902 Thomas Drive S, Unit 1132 Panama City Beach, FL 32408 William E. Cowart 9902 Thomas Drive S, Unit 1132 Panama City Beach, FL 32408 EV: Effective date, if other than the date of filing: (OPTIONAL) crive date is listed, the date must be specific and cannot be more than five business days prior to or 5 filing.) the date inserted in this block does not meet the applicable statutory filing requirements, this date will num's effective date on the Department of State's records. EVI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a member of an authorized gepresentative of a member. This document is executed in seed dance 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. Laura C. Pyne, Esq. Typed or printed name of signee Filing Fees:	Title: "AMBR" = Authorized Member	Name and Address:
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\$ 5.00 Certificate of Status (Optional)