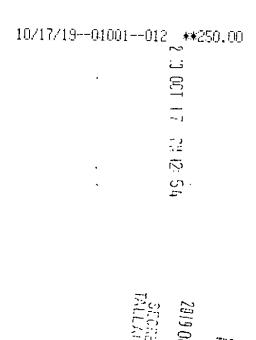
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(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:





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CAPITAL CONNECTION, INC.

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

Gold Coast Properties USA, LLC 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_____ Signature Vehicle Search Driving Record_____ Requested by: Seth UCC 1 or 3 File_____ 10/17/19 UCC 11 Search_____ Name Date Time UCC 11 Retrieval____ Will Pick Up _ Walk-In Courier____ Panaer's Printing - Thomisside GA 8/00

COVER LETTER

	ew Filing Section ivision of Corporations				
SUBJECT	Gold Coast Properties USA, LLC				
SOBJECT	Name of Limited Liability Company				
The enclos	ed Articles of Organization and fee(s) are submitted for filing.				
Please retu	rn all correspondence concerning this matter to the following:				
	Yasir Billoo Esq.				
	Name of Person				
	International Law Partners LLP				
	Firm/Company				
	2122 Hollywood Blvd.				
	Address				
	Hollywood, FL 33020				
	City/State and Zip Code ybilloo@ilp.law				
•	E-mail address: (to be used for future annual report notification)				
For further is	nformation concerning this matter, please call:				
	Yasir Billoo 954 374-7722				
	Name of Person Area Code Daytime Telephone Number				
Enclosed is	s a check for the following amount:				
\$125.00 F	iling Fee \$\int_{\text{S130.00 Filing Fee & Certificate of Status}} \int_{\text{S155.00 Filing Fee & Certificate of Status & Certificate of Status & Certified Copy (additional copy is enclosed)}} \int_{\text{Certified Copy (additional copy is enclosed)}} \int_{\text{S155.00 Filing Fee & Certificate of Status & Certified Copy (additional copy is enclosed)}}}				
	Mailing AddressStreet AddressNew Filing SectionNew Filing SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301				

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the Limited Liability Company is: Gold Coast Properties USA, 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 Principal Office Address:	he Limited Liability Company is: Mailing Address:
7860 NW 62 Street Miami, FL 33166	PO BOX 668318 Miami, FL 33166

The name and the Florida street address of the registered agent are;

Name

2122 Hollywood Blvd.

Florida street address (P.O. Box NOT acceptable)

Hollywood FL 33020

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.

(CONTINUED)

2019 OCT 17 PH12: 25

<u>Title:</u> "AMBR" = Authorized "MGR" = Manager	Member	Name and Address:	
MGR		Adam Behnejad	
	-	7860 NW 62 Street Miami, FL 33166	
MGR		Mohammad Behnejad	
		7860 NW 62 Street	
		Miami, FL 33166	
		<u></u>	
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date of filing.)	ther than the date of fi date must be specific	ling: (OPTIONAL) c and cannot be more than five business days prior to or 90 days after	
document's effective date on	the Department of St	the applicable statutory filing requirements, this date will not be listed as	
		late 3 records.	
TICLE VI: Other provisions,	if any.		
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REQUIRED SIGNAT	nor.		
RECURRED SIGNAL	ORE:	lan Bely in	
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Si	gnature of a membe	r or an authorized representative of a member.	
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constitu	ics a third degree felo	any as provided for in \$.817.155, F.S.	
constitu —	ADAM	ped 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)