L19000275155

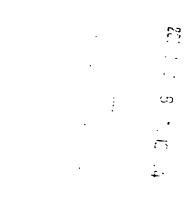
(Re	equestor's Name)	··
(Ad	ldress)	
(Ad	idress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	Wait	MAIL
(Bu	ısiness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	





900337115589

11/18/19--01002--010 **160.00



TILED SIMBLE THE SEASON OF THE

COVER LETTER

TO: New Filing Section Division of Corporations
SUBJECT: Coastal Handyman 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:
Coastal Handyman LLC
1240 NE 13th Ave Apt #25, Ft Lawderdale,
FL, 33304
City/State and Zip Code Big Rob 5 78 eg mail . Com E-mail address: (to be used for future annual report notification)
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Robert Joseph Link Jai 954 412 8965 Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
\$125.00 Filing Fee S130.00 Filing Fee & S155.00 Filing Fee & Certificate of Status Certified Copy (additional copy is enclosed) \$160.00 Filing Fee. 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

FILED
2111 NOV 18 PM 3:43
ATTAKY STATE

ARTICLE I - Name:

The name of the Limited Liability Company is:

Coasia Handyman 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:	Mailing Address:
1240 NE 13th Ave. 4pt#25 Ff Lawderdale, FL, 33304 F)	
rf 14 weroa (e, 1-2, 3530 ()	

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:

Robert Jose	ph Lin	k Jr.
	Name	
1240 NE 1311	Aue 1	Apt 7+25
Florida street address	(P.O. Box <u>N</u>	OT acceptable)
Fflanderdale,	Î-L	33304
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.,

Registered Agent's Signature (REQUIRED)

(CONTINUED)

Title:	Name and Address:
"AMBR" = Authorized Membe:	0 1 01 5 101 10 1 70
"MGR" = Manager A M D	Robert Joseph Link Jr.
	1240 NE 13th Are Apt 25 F/ Godescole, F1, 33304
	11 1200 e100 14, 1-1, 3530 1
	1/1A 1/1A
	- 11 - 12 - 12 - 12 - 12 - 12 - 12 - 12
(Use attachment if necessary)	
(Use attachment if necessary)	SEE FILE SEE SEE SEE SEE SEE SEE SEE SEE SEE S
FIGURA V. Effective data if other than the date	of filing: (OPTIONAL) ⊇ ⇔
FICLE V: Effective date, if other than the date in effective date is listed, the date must be sp	ecific and cannot be more than five business days prior to or 90 days aft
FICLE V: Effective date, if other than the date in effective date is listed, the date must be sp date of filing.) te: If the date inserted in this block does not recovered.	e of filing:
FICLE V: Effective date, if other than the date in effective date is listed, the date must be sp	e of filing:
FICLE V: Effective date, if other than the date in effective date is listed, the date must be sp date of filing.) te: If the date inserted in this block does not recovered.	e of filing:
FICLE V: Effective date, if other than the date in effective date is listed, the date must be sp date of filing.) te: If the date inserted in this block does not redocument's effective date on the Department	e of filing:
FICLE V: Effective date, if other than the date in effective date is listed, the date must be sp date of filing.) te: If the date inserted in this block does not redocument's effective date on the Department	e of filing:
FICLE V: Effective date, if other than the date in effective date is listed, the date must be specified of filing.) te: If the date inserted in this block does not a document's effective date on the Department FICLE VI: Other provisions, if any.	e of filing:
FICLE V: Effective date, if other than the date in effective date is listed, the date must be sp date of filing.) te: If the date inserted in this block does not r document's effective date on the Department FICLE VI: Other provisions, if any. REQUIRED SIGNATURE:	ecific and cannot be more than five business days prior to or 90 days after the applicable statutory filing requirements, this date will not be listed of State's records.
FICLE V: Effective date, if other than the date in effective date is listed, the date must be sp date of filing.) te: If the date inserted in this block does not r document's effective date on the Department FICLE VI: Other provisions, if any. REOURED SIGNATURE: Advect for	ecific and cannot be more than five business days prior to or 90 days after the applicable statutory filing requirements, this date will not be listed of State's records.
FICLE V: Effective date, if other than the date in effective date is listed, the date must be sp date of filing.) te: If the date inserted in this block does not r document's effective date on the Department FICLE VI: Other provisions, if any. REQUIRED SIGNATURE: Advect for	ecific and cannot be more than five business days prior to or 90 days aft with the applicable statutory filing requirements, this date will not be listed of State's records.
PICLE V: Effective date, if other than the date in effective date is listed, the date must be specified of filing.) te: If the date inserted in this block does not redocument's effective date on the Department document's effective date on the Department FICLE VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a manager that any fall	meet the applicable statutory filing requirements, this date will not be listed of State's records. The state of a member or an authorized representative of a member, uted in accordance with section 605.0203 (1) (b), Florida Statutes, se information submitted in a document to the Department of State
PICLE V: Effective date, if other than the date in effective date is listed, the date must be sp date of filing.) te: If the date inserted in this block does not r document's effective date on the Department TICLE VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a n This document is exect I am aware that any fall constitutes a third degr	meet the applicable statutory filing requirements, this date will not be listed of State's records. The property of a member or an authorized representative of a member, uted in accordance with section 605.0203 (1) (b). Florida Statutes, se information submitted in a document to the Department of State region of State region of State regions as provided for in s.817.155, F.S.
PICLE V: Effective date, if other than the date in effective date is listed, the date must be sp date of filing.) te: If the date inserted in this block does not r document's effective date on the Department TICLE VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a n This document is exect I am aware that any fall constitutes a third degr	meet the applicable statutory filing requirements, this date will not be listed of State's records. The state of a member of an authorized representative of a member, uted in accordance with section 605.0203 (1) (b), Florida Statutes, se information submitted in a document to the Department of State

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)