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(Address)
(City/State/Zip/Phone #)
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(Document Number)
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W220000 ³⁷ 294

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03/03/22--01007--015 **130.00

4/1/22



March 22, 2022

LARA M CURRIE 1133 BAY RD LAKE GEORGE, NY 12845

SUBJECT: COASTAL RENTALS 4 US, LLC

Ref. Number: W22000037294

We have received your document for COASTAL RENTALS 4 US, LLC and your check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 605.0203(1), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Karen Lovelace Regulatory Specialist II

14/22

Letter Number: 722A00006693

COVER LETTER

TO:	New Filing Se Division of Co					
SUBJEC		entals 4 Us, LLC				
SUBJEC	-1: <u></u>	Nar	ne of Lim	nited Liabili	ty Company	
The encl	osed Articles o	f Organization and	fee(s) arc	submitted	for filing.	
Please re	eturn all corresp	ondence concernin	ig this ma	tter to the f	following:	
	Lara M. Cui	rrie				
				Name of	Person	
				Firm/Co	mpany	
	1133 Bay R	oad	_			
				Addr	ess	
	lake George	NY 12845				
	laracurrie429	Qumail com	С	ity/State an	d Zip Code	
			be used	for future a	nnual report notificati	ion)
For further	r information co	oncerning this matt	er, please	call:		
	Lara Currie		51	8	744-0820	
	Nan	ne of Person			Daytime Telephon	e Number
Enclosed	is a check for t	he following amou	ınt:			
	00 Filing Fee	■\$130.00 Filin Certificate of S	ig Fee &	Certifi	5.00 Filing Fee & ed Copy al copy is enclosed)	☐\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	New F	ng Address iling Section			Street Address New Filing Section Di The Centre of Tallaha	
	P.O. B	on of Corporations lox 6327 assee, FL 32314	•		2415 N. Monroe Stre Tallahassee, FL 3230	et, Suite 810

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

(Mu	st contain the words "Limited Li	ability Company,	"L.L.C.," or "LLC.")
RTICLE II - Address: he mailing address and s	treet address of the principal off	ice of the Limited	Liability Company is:
<u>P</u>	rincipal Office Address:		Mailing Address:
1122 D D	I. Lake George NY 12845	same	<u> </u>
1133 Bay Road			
RTICLE III - Register he Limited Liability Co- other business entity wi	ed Agent, Registered Office, & mpany cannot serve as its own R th an active Florida registration	egistered Agent.	nt's Signature: You must designate an individual or
RTICLE III - Register he Limited Liability Co- other business entity wi	ed Agent, Registered Office, & mpany cannot serve as its own R	egistered Agent.	nt's Signature: You must designate an individual or
RTICLE III - Register he Limited Liability Co- other business entity wi	ed Agent, Registered Office, & apany cannot serve as its own R th an active Florida registration street address of the registered at Lisa Perez	egistered Agent.	nt's Signature: You must designate an individual or
RTICLE III - Register he Limited Liability Co- other business entity wi	ed Agent, Registered Office, & apany cannot serve as its own R th an active Florida registration street address of the registered at Lisa Perez	egistered Agent.) gent are:	nt's Signature: You must designate an individual or
RTICLE III - Register he Limited Liability Co- other business entity wi	ed Agent, Registered Office, & mpany cannot serve as its own R th an active Florida registration street address of the registered a Lisa Perez	egistered Agent.) gent are: Name	You must designate an individual or
RTICLE III - Register he Limited Liability Co- other business entity wi	ed Agent, Registered Office, & mpany cannot serve as its own R th an active Florida registration street address of the registered a Lisa Perez.	egistered Agent.) gent are: Name	You must designate an individual or

(CONTINUED)

Registered Agent's Signature (REQUIRED)

ARTICLE IV-

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

Title:		Name and Address:	
"AMBR" = Au "MGR" = Mar	uthorized Member nager		
AMBR		Lara Mehr Currie	
" -		1133 Bay Road Lake George NY 12845	
		Lake George (VI 1205)	
AMBR		John V. Currie	
		Lake George NY 12845	
AMBR		Konrad Erik Mehr	
<u> </u>		1150 10th Ave., NE Ilssaguah WA 98029	
		lissaquan wa 98029	···
(Use attachme	nt if necessary)		
cument's effectiv	e date on the Department of ovisions, if any.		
REOUIRED	SIGNATURE:	<i>7</i> 3 · ·	
	Lara .	M (in	
	This document is executed I am aware that any false	mber or an authorized representative of a member, ed in accordance with section 605.0203 (1) (b), Florida information submitted in a document to the Department felony as provided for in s.817.155, F.S.	i Statutes.
	constitutes a unito degree	telony as provided for its sol 7,133,133.	
	Lara Mehr Currie		
	_	Typed or printed name of signee	
\$125.00 Filii	Lara Mehr Currie	Typed or printed name of signee Filing Fees:	
	Lara Mehr Currie	Typed or printed name of signee	
\$ 30.00 Cer	<u>Lara Mehr Currie</u> ng Fee for Articles of Org	Typed or printed name of signee Filing Fees: anization and Designation of Registered Agent	· ••••••••••••••••••••••••••••••••••••

COVER LETTER

TO:	New Filing Sec Division of Co					
erin ir		entals 4 Us. LLC				
SUBJEC	_1:	Name of	Limited Liab	ility Company		
The enci	losed Articles of	Organization and feets) are submitte	ed for filing.		
Please re	etum all corresp	ondence concerning this	s matter to the	following:		
	Lara M. Cur	тie				
			Name o	of Person		
			Firm/C	ompany		
	1133 Bay Ro	oad				
			Ado	lress		
	lake George	NY 12845				
	laracurrie429	Quamuit com	City/State a	nd Zip Code		
		E-mail address: (10 be u	sed for future	annual report notificati	ion)	
For further	r information co	nceming this matter, ple	ease call:			
	Lara Currie	at	518	744-0820		
	Nam	e of Person	Area Code	Daytime Telephon	e Number	
Enclosed	is a check for t	he following amount:				
□\$125.0	00 Filing Fee	■\$130,00 Filing Fee Certificate of Status	Сепі	55.00 Filing Fee & fied Copy nal copy is enclosed)	□\$160.00 Fili Certificate of S Certified Copy (additional copy	Status &
	New F Division P.O. B	g Address iling Section on of Corporations ox 6327 assee, FL 32314		Street Address New Filing Section Di The Centre of Tallaha 2415 N. Monroe Stree Tallahassee, FL 3230	issee et, Suite 810	2 877 (2 45 EU C

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

Coastal Rentals 3	Us, LLC		
(Must e	ontain the words "Limited	Liability Compan	y, "L.L.C.," or "LLC.")
RTICLE II - Address: The mailing address and stree	et address of the principal (office of the Limit	ed Liability Company is:
<u>Prin</u>	cipal Office Address:		Mailing Address:
1133 Bay Road, L	.ake George NY 12845	sa	ne
RTICLE III - Registered /	Avent. Registered Office.	& Registered Ag	ent's Signature:
RTICLE III - Registered A	any cannot serve as its owi	n Registered Agen	ent's Signature: . You must designate an individu
RTICLE III - Registered A The Limited Liability Compa nother business entity with a	any cannot serve as its own an active Florida registrati	n Registered Agen on.)	ent's Signature: . You must designate an individu:
RTICLE III - Registered A The Limited Liability Compa nother business entity with a	any cannot serve as its own an active Florida registrati	n Registered Agen on.)	ent's Signature: . You must designate an individu:
RTICLE III - Registered A The Limited Liability Compa nother business entity with a	any cannot serve as its own an active Florida registration and address of the registere	n Registered Agen on.)	ent's Signature: . You must designate an individu:
ARTICLE III - Registered A The Limited Liability Compa nother business entity with a	any cannot serve as its own an active Florida registration and active Florida registere address of the registere Lisa Perez 6906 Belleair Ave	n Registered Agen on.) d agent are: Name	. You must designate an individue
ARTICLE III - Registered A The Limited Liability Compa nother business entity with a	any cannot serve as its own an active Florida registration and active florida registere address of the registere <u>Lisa Perez</u>	n Registered Agen on.) d agent are: Name	. You must designate an individue
ARTIC! F III - Registered /	any cannot serve as its own an active Florida registration and active Florida registere address of the registere Lisa Perez 6906 Belleair Ave	n Registered Agen on.) d agent are: Name	. You must designate an individu

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)

ARTICLE IVThe name and address of each person authorized to manage and control the Limited Liability Company:

<u>Title:</u> "AMBR" = Authorized Member "MGR" = Manager	Name and Address:	
AMBR	Lara Mehr Currie 1133 Bay Road Lake George NY 12845	
AMBR	John V. Currie 1133 Bay Road Lake George NY 12845	. 4
AMBR	Konrad Erik Mehr 1150 10th Ave., NE Hssaguah WA 98029	
(Use attachment if necessary)		
E V: Effective date, if other than the ective date is listed, the date must of filing.) the date inserted in this block does nent's effective date on the Depart	e date of filing:	to or 40 da
E V: Effective date, if other than the ective date is listed, the date must of filing.) the date inserted in this block does nent's effective date on the Depart E VI: Other provisions, if any.	not meet the applicable statutory filing requirements, this date	will not be
E V: Effective date, if other than the ective date is listed, the date must of filing.) the date inserted in this block does ment's effective date on the Depart E VI: Other provisions, if any.	the specific and cannot be more than five business days prior not meet the applicable statutory filing requirements, this date ment of State's records.	will not be
E V: Effective date, if other than the ective date is listed, the date must of filing.) the date inserted in this block does ment's effective date on the Depart E VI: Other provisions, if any. REOUIRED SIGNATURE: Signature of This document is even any are that an	the specific and cannot be more than five business days prior not meet the applicable statutory filing requirements, this date ment of State's records.	will not be
E V: Effective date, if other than the ective date is listed, the date must of filing.) the date inserted in this block does ment's effective date on the Depart E VI: Other provisions, if any. REOUIRED SIGNATURE: Signature of This document is expressed.	Ta member or an authorized representative of a member. executed in accordance with section 605.0203 (1) (b). Florida Sty false information submitted in a document to the Department of legree felony as provided for in s.817.155, F.S.	will not be
E V: Effective date, if other than the ective date is listed, the date must of filing.) the date inserted in this block does nent's effective date on the Depart E VI: Other provisions, if any. REOURED SIGNATURE: Signature of This document is early am aware that any constitutes a third of Lara Mehr (Ta member or an authorized representative of a member. Executed in accordance with section 605.0203 (1) (b). Florida Sty false information submitted in a document to the Department of degree felony as provided for in s.817.155, F.S. Curric Typed or printed name of signee Filing Fees: Of Organization and Designation of Registered Agent	will not be