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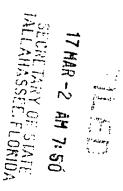
(Requestor's Name	e)					
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PICK-UP WAIT	MAIL					
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Certified Copies Certificates of Status						
Special Instructions to Filing Officer:						
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February 21, 2017

JAMES KINGTON PO BOX 337 DESTIN, FL 32540

SUBJECT: GULF COAST KINGTONPROPERTIES, LLC

Ref. Number: W17000014928

We have received your document for GULF COAST KINGTONPROPERTIES, LLC and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

A certificate of existence or a certificate of good standing, dated no more than 90 days-prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

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) 245-6051.

Octavia I Simmons Regulatory Specialist II

Letter Number: 717A00003349

COVER LETTER

	egistration Section ivision of Corporations			
SUBJECT	Gulf Coast Kington Properties, LLC			
SOBSECT	Name of Limited Liability Company			
	ed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of and check are submitted to register the above referenced foreign limited liability company to transact business in Florida			
Please retu	rn all correspondence concerning this matter to the following:			
	James Kington			
	Name of Person			
	Gulf Coast Kington Properties, LLC			
Firm/Company				
	P.O. Box 337			
Address				
•	Destin, Florida 32540			
	City/State and Zip Code			
٠	kington3301@yahoo.com			
	E-mail address: (to be used for future annual report notification)			
For further	information concerning this matter, please call:			
S	herrie Salas 850 424-4120 at ()			
_	Name of Contact Person Area Code Daytime Telephone Number			
D R P	IAILING ADDRESS: ivision of Corporations egistration Section O. Box 6327 allahassee, FL 32314 STREET ADDRESS: Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301			
	s a check for the following amount: \$125.00 Filing Fee			

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED ILABILITY COMPANYTOTRANSACTER ISINESS INTUIE STATE OF FLORIDA:

1. Gulf Coast Kington Pro	•				
(Name of Fore	eign Limited Liability Company; must	include "Limited Liability Comp	pany," "L.L.C.," or "LI	.C.'')	
Liability Company," "L.L.C,	ternate name adopted for the purpose " or "LLC.")	of transacting business in Florida	a. The alternate name n	nust inclu	ide "Limited
2. State of Texas		3. 46-1063329			
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)					
i. 02/16/17 (no prior date	•				
	(Date first transacted busines (See sections 605,0904 & 605,0	s in Florida, if prior to registration 1905, F.S. to determine penalty lia	n.) ability)		
5. 543 Harbor Blvd. Suite					
Destin, Florida 32541					
	(Street Address of P	rincipal Office)	<u>≥</u>	·	
5. P.O. Box 337	Y		1: · · · · ·	7	
Destin, Florida 32540			(長年)	MAR	
	(Mailing A	(ddress)		<u>.</u>	e Abrican and Schooling
Name and street address	s of Florida registered agent: (P.0	O Pay NOT againtable)	ů.c Ļ∴≺	J.34	o de como de la como dela como de la como de
. Ivanie and street addres	,	J. Box <u>NOT</u> acceptante)		-	Emery.
Name:	James Kington		.0R	7: 5	Super
Office Address:	543 Harbor Blvd. Ste 403		ii Da	Ö	
	Destin	, Florida	32541		•
	(City)	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	(Zip code)		
lesignated in this applica o complywith the provisi	gistered agent and to accept serv tion, I hereby accept the appoint ons of all statutes relative to the p my position as registered agent.	ment as registered agent and a	agree to act in this c	apacity.	. I further agree
	Rogiste	ered agent's signature)			
8. The name, title or capa James Kington, Manager	acity and address of the person(s)	who has/have authority to mar	nage is/are:		
P.O. Box 337			· · · · · · · · · · · · · · · · · · ·		
Destin, FL 32540			7		
	of existence, no more than 90 day of which it is organized. (If the equipment of the continuous of the				
	Signature	of an authorized person			
	l in accordance with section 605.0 the Department of State constitu				ormation
	James Kington				

Typed or printed name of signee

Corporations Section P.O.Box 13697 Austin, Texas 78711-3697



Office of the Secretary of State

Certificate of Fact

The undersigned, as Secretary of State of Texas, does hereby certify that the document, Certificate of Formation for Gulf Coast Kington Properties, LLC (file number 801654118), a Domestic Limited Liability Company (LLC), was filed in this office on September 13, 2012.

It is further certified that the entity status in Texas is in existence.

In testimony whereof, I have hereunto signed my name officially and caused to be impressed hereon the Seal of State at my office in Austin, Texas on February 28, 2017.





Rolando B. Pablos Secretary of State

Phone: (512) 463-5555 Prepared by: SOS-WEB