# 111000003607

(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: SPOKKETO Mr. McKeyon #128/17 CEO OFENLLY						
W17-27629						

Office Use Only



500296395515

03/30/17--01029--010 \*\*125.00



O SIMMONS APR 28 2017 FAX: to 850 245 6030

DATE: 4/27/17

TOY Miss SIMMONS

FROM: COIMIN MCASEY

COASTAL HOME CONSTRUCTION LLC

REF Number 017A 0000 6234

2017 APR 28 AM 10: 52

#### 4/20/2017

Division of Corporations
Registration Section
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301
Attention: Miss Simmons

RE: Corrected Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida

Dear Miss Simmons,

I am enclosing an updated application for my foreign LLC, Coastal Home Construction, as per our conversation, my previous application submission did not include my signature in error.

In addition, my address has changed from the time I submitted my previous application, so if you could update this as well I would appreciate it.

I have already made payment for the registration.

If you have any further questions/concerns, please do not hesitate to contact me at the following address:

Coimin McAsey 4390 Lazio Way Unit 406 Fort Myers, Florida, 33901 Telephone – 407/955-0348

Thank you again for your help,

Coimin McAsey Enclosures LLAHASSÉE, FLORIB

#### **COVER LETTER**

то:	Registration Section Division of Corporatio	ns						
SUBJE	Coastal Home Con	struction LLC						
Name of Limited Liability Company								
		reign Limited Liability Comp ed to register the above refere						
Please r	eturn all correspondence	concerning this matter to the	following:					
	Coimin McAs	еу						
Name of Person								
Sunbelt Property Solutions LLC								
Firm/Company								
1000 San Lino Cir unit 1032								
Address								
Venice, Florida, 34292								
City/State and Zip Code								
elginholdings@gmail.com								
	· · · · · · · · · · · · · · · · · · ·	E-mail address: (to be used	for future annual	report not	ification)			
For furt	her information concerning	ng this matter, please call:						
	Coimin McAsey		813 at (	415831	4			
	Name	of Contact Person	Area Code	Day	time Telephone Number			
MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314		STREET ADDRESS: Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301						
Enclosed is a check for the following amount:  ■ \$125.00 Filing Fee  \$130.00 Filing Fee & Certificate of Status			☐ \$155.00 Filing Fee & ☐ \$160.00 Filing Fee, C Certified Copy of Status & Certified Co					

### 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 LIABILITY COMPANYTO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. Coastal Home Construc			
,	- ' ' '	de "Limited Liability Company," "L.L.C.," or "L	.LC.")
Coastal Homes Construct	·		
Liability Company," "L.L.C,"	" or "LLC.")	nsacting business in Florida. The alternate name	must include "Limited
2. The State of DELAWA	RE 3.	820879581	
(Jurisdiction under the law company is organized)	of which foreign limited liability	(FEI number, if applicable)	
4. Has not transacted bus			wise =
	(Date first transacted business in FI (See sections 605.0904 & 605.0905, I	lorida, if prior to registration.) F.S. to determine penalty liability)	章 说
5. 4390 Lazio Way, Unit	406		228
Fort Myers, Florida, 33	3901		<b>D</b> 1.1
	(Street Address of Principal	al Office)	الوارد الا الوارد الا
6. 4390 Lazio Way, unit	106		Ţ.
Fort Myers, Florida, 33	3901		· o
	(Mailing Address	s)	
7 Name and street address	ss of Florida registered agent: (P.O. Bo	x NOT acceptable)	
	Coimin McAsey	,	
Name:		····	
Office Address:	4390 Lazio Way, Unit 406	<del></del>	
	Fort Myers	, Florida 33901 (Zip code)	
Registered agent's accep	(City)	(Zip code)	
designated in this applicate to complywith the provisi	tion, I hereby accept the appointment	process for the above stated limited liability as registered agent and agree to act in this rand complete performance of my duties, i	capacity. I further agree
	(Pagistared as	gent's signature)	
8. The name, title or cap	acity and address of the person(s) who h	nas/have authority to manage is/are:	
Coimin McAsey (Sunbel	t Property Solutions LLC) CED		
4390 Lazio Way, Unit 40	6		
Fort Myers, Florida, 3390	01		
9. Attached is a certificate jurisdiction under the law of the translator must be s	of which it is organized. (If the certifical ubmitted)	, duly authenticated by the official having crate is in a foreign language, a translation of t	istody of records in the he certificate under oath
	<del>-</del>	7)	
This document is execute submitted in a document to	d in accordance with section 605.0203 ( to the Department of State constitutes a t	<ol> <li>(b), Florida Statutes. I am aware that any hird degree felony as provided for in s.817.1</li> </ol>	false information 55, F.S.
	Coimin McAsey		

Typed or printed name of signee

Page 1

## Delaware The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "COASTAL HOME CONSTRUCTION LLC" IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE SEVENTEENTH DAY OF MARCH, A.D. 2017.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "COASTAL HOME CONSTRUCTION LLC" WAS FORMED ON THE SIXTEENTH DAY OF MARCH, A.D. 2017.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN ASSESSED TO DATE.

6349259 8300 SR# 20171828374



Authentication: 202214162

Date: 03-17-17