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(Requestor's Name)

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(City/State/Zip/Phone #)

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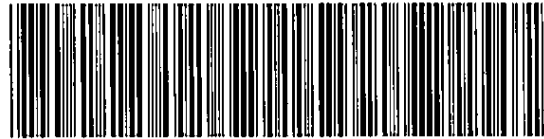
(Business Entity Name)

(Document Number)

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APPROVED
AND
FILED
2022 SEP -6 PM 2:39
SECRETARY OF STATE
TALLAHASSEE, FL 0903

SEP 13 2022
J. Brumby

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: SOUTHEAST COASTAL LEASING, LLC

Name of Limited Liability Company

The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida.

Please return all correspondence concerning this matter to the following:

CATHERINE B DEGGELLER

Name of Person

SOUTHEAST COASTAL LEASING, LLC

Firm/Company

3350 SW DEGGELLER COURT

Address

PALM CITY, FLORIDA 34990

City/State and Zip Code

DALOODLE11@YAHOO.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

BONNIE L JACOBSON

813 713-4067
at ()

Name of Contact Person

Area Code

Daytime Telephone Number

Mailing Address:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Enclosed is a check for the following amount:

Please make check payable to: **FLORIDA DEPARTMENT OF STATE**

☐ \$125.00 Filing Fee

☐ \$130.00 Filing Fee &
Certificate of Status

☐ \$155.00 Filing Fee &
Certified Copy

☒ \$160.00 Filing Fee, Certificate
of Status & Certified Copy

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
COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. SOUTHEAST COASTAL LEASING, LLC
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")

(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Liability Company," "L.L.C.," or "LLC.")

2. STATE OF DELAWARE 3. 86-1071160
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)

4. DECEMBER 9, 2002
(Date first transacted business in Florida, if prior to registration.)
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. 3350 SW DEGGELLER COURT 6. PO BOX 238
(Street Address of Principal Office) (Mailing Address)

PALM CITY, FLORIDA STUART, FLORIDA
34990 34995

7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: JAMIE A DEGGELLER

Office Address: 3350 SW DEGGELLER COURT

PALM CITY, Florida 34990
(City) (Zip code)

Registered agent's acceptance:

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 application, 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 relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Jamie A. Deggeller
(Registered agent's signature)

APPROVED
AND
FILED
2002 SEP -6 PM 2:39
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

8. For initial indexing purposes, list names, title or capacity and addresses of the primary members/managers or persons authorized to manage [up to six (6) total]:

Title or Capacity: **Name and Address:**

☒ Manager Name: CATHERINE B DEGGELLER

☐ Member Address: 3134 WIMBEDON TERR

☐ Authorized PALM CITY, FLORIDA 34990

Person _____

☐ Other _____ ☐ Other _____

Title or Capacity: **Name and Address:**

☒ Manager Name: DONALD L DEGGELLER

☐ Member Address: 3134 WIMBEDON TERR

☐ Authorized PALM CITY, FLORIDA 34990

Person _____

☐ Other _____ ☐ Other _____

☐ Manager Name: HEIDI PUGH

☐ Member Address: 1645 SW MAPP ROAD

☒ Authorized PALM CITY, FLORIDA 34990

Person _____

☐ Other _____ ☐ Other _____

☐ Manager Name: ROBERT C PUGH

☐ Member Address: 1645 SW MAPP ROAD

☒ Authorized PALM CITY, FLORIDA 34990

Person _____

☐ Other _____ ☐ Other _____

☐ Manager Name: BONNIE L JACOBSON

☐ Member Address: 3622 NEW RIVER ROAD

☒ Authorized WESLEY CHAPEL, FLORIDA 33543

Person _____

☐ Other _____ ☐ Other _____

☐ Manager Name: DAVID K CAMPBELL

☐ Member Address: 3350 SW DEGGELLER COUR

☒ Authorized PALM CITY, FLORIDA 34990

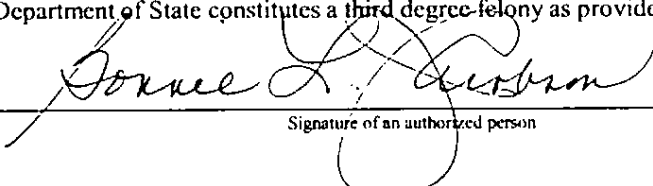
Person _____

☐ Other _____ ☐ Other _____

Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed individuals may be added to the index when filing your Florida Department of State Annual Report form.

9. Attached is a certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted)

10. This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.



Signature of an authorized person

Typed or printed name of signee

Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "SOUTHEAST COASTAL LEASING, 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 FOURTEENTH DAY OF JULY, A.D. 2022.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "SOUTHEAST COASTAL LEASING, LLC" WAS FORMED ON THE NINTH DAY OF DECEMBER, A.D. 2002.

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




Jeffrey W. Bullock, Secretary of State