Division of Corporations

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Division of Corporations
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Katherine Harris, Secretary of State

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To:

Division of Corporations

Fax Number

: (850)922-4003

From:

Account Name : FIELDSTONE LESTER SHEAR & DENBERG

Account Number : I19990000180 Phone : (305)357-5775

Fax Number : (305)357-5776

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PILEU 9: 05

LIMITED LIABILITY COMPANY

Intercoastal Yacht Club, LLC

Certificate of Status	0
Certified Copy	1
Page Count	02
Estimated Charge	\$155.00

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ARTICLES OF ORGANIZATION FOR FLORIDA LEMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Intercoastal Yacht Club, LLC

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

3211 Ponce De Leon Blvd., Suite 301 Coral Gables, FL 33134

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

The name and the Florida street address of the registered agent are:

David Shear	
Name:	-
201 Alliambra Circle, Suite 601 Florida street address (P.O. Box NOT acceptable)	
Florida street address (P.O. Box NOT acceptable)	_
Coral Gables, FL 33134 City, State, and Zip	
City, State, and 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 608, F.S.

Registered Ageor's Signature

Article IV - Management (Check box if applicable.)

The Limited Liability Company is to be managed by one manager or more managers and is, therefore, a manager - managed company.

(An additional article must be added if an effective date is requested)		
Signature of a member or an arthorized representative of a member. (In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of penjury that the faces stated herein are true.)	1 AON 00	<u> </u>
Tose Milton, Manager Typed or primed name of signer	6 NM 9: 05	

(((H00000060416 5))) CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1.	The name of the Limited Liability Company is:
	Interconstal Venht Club II.C.

2.	The name and th	e Florida stret	et address of the	he registered	agent and	offic e are:
<i>-</i>				~	_	

	David Shear
	Name
	201 Alhambra Circle, Suite 601
Fio	201 Alhambra Circle, Suite 601 rida street address (P.O. Box NOT acceptable)
	Coral Gables, FL 33134 City, State, and Zip
	City, State, and 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 608, F. S.

(Signature)

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