

L000000011364

09/20/2000 09:15 366-7478

CASWELL P.A.

PAGE 01

Division of Corporations

Page 1 of 7

Florida Department of State

Division of Corporations

Public Access System

Katherine Harris, Secretary of State

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H00000049752 9)))

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850) 922-4003

From:

Account Name : CHRISTOPHER K. CASWELL, P.A.

Account Number : 105205003431

Phone : (941) 366-7727

Fax Number : (941) 366-7478

LIMITED LIABILITY COMPANY

Florida Travel Team, LLC

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$125.00

RECEIVED
00 SEP 20 AM 9:50
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED
00 SEP 20 PM 12:43
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

W29/20

3P



FLORIDA DEPARTMENT OF STATE

Katherine Harris
Secretary of State

September 19, 2000

CHRISTOPHER K. CASWELL, P.A.

SUBJECT: FLORIDA TRAVEL TEAM, LLC
REF: W00000022869

We have received your electronically transmitted document. However, the document was submitted under the wrong EFIL type and cannot be processed by this office.

To proceed, you must abandon this filing and resubmit your filing under the appropriate EFIL type.

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) 487-6958.

Lee Rivers
Document Specialist

FAX Aud. #: H00000049249
Letter Number: 900A00049412

FILED
00 SEP 20 PM 12:43
SECRETARY OF STATE
TALLAHASSEE FLORIDA

#H000000497529

~~#H000000492496~~ARTICLES OF ORGANIZATION
OF

FLORIDA TRAVEL TEAM, LLC

The undersigned, pursuant to the provisions of Chapter 608 of the Florida Statutes, for the purpose of forming a Limited Liability Company under the laws of the State of Florida do set forth the following:

1. NAME. The name of the Limited Liability Company is **FLORIDA TRAVEL TEAM, LLC**.
2. ADDRESS OF PLACE OF BUSINESS. The mailing address and street address of the principal office of the Limited Liability Company is **623 Avenida Del Norte, Sarasota FL 34242**.
3. MANAGEMENT. The Limited Liability Company is to be managed by its members.
4. REGISTERED AGENT. The name and address of the initial registered agent in Florida for the Limited Liability Company is **Chris Caswell, 2364 Fruitville Road, Sarasota, FL 34237**.

Under penalties of perjury, and in accordance with section 608.408(3), Florida Statutes, the execution of these articles constitutes an affirmation that the facts stated herein are true.

DATE OF EXECUTION: Sept 18, 2000By: Bruce Charity
Bruce Charity as member or authorized representative of member

CERTIFICATION AND ACCEPTANCE OF REGISTERED AGENT

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, the undersigned hereby accepts such an 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.

Chris Caswell
Chris Caswell, Registered AgentPREPARER: CHRISTOPHER K. CASWELL
2364 FRUITVILLE ROAD
SARASOTA, FLORIDA 34237
941-366-7727
FLA. BAR NO. 0371211FILED
00 SEP 20 PM 12:43
SECRETARY OF STATE
TALLAHASSEE FLORIDA~~#H000000492496~~

#H000000497529