

L03000011216

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

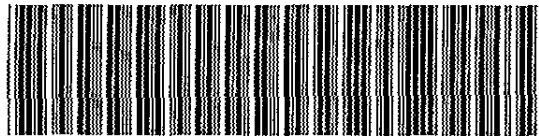
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only

31



100014404771

03/28/03--01041--018 **250.00

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
03 MAR 28 PM 1:13
Ln 3/28

RECEIVED
03 MAR 28 AM 11:48
DIVISION OF CORPORATIONS
TALLahassee, FLORIDA

\$125.00

**CORPORATE
ACCESS,
INC.**

236 East 6th Avenue . Tallahassee, Florida 32303

P.O. Box 37066 (32315-7066) ~ (850) 222-2666 or (800) 969-1666 . Fax (850) 222-1666

WALK IN

PICK UP

3/28 TOS

☐ CERTIFIED COPY

☐ CUS

☒ PHOTO COPY

☒ FILING

LLC

1.) Osprey Offshore Charters, LLC
(CORPORATE NAME & DOCUMENT #)

2.)
(CORPORATE NAME & DOCUMENT #)

3.)
(CORPORATE NAME & DOCUMENT #)

4.)
(CORPORATE NAME & DOCUMENT #)

5.)
(CORPORATE NAME & DOCUMENT #)

FILED STATE
SECRETARY OF CORPORATIONS
DIVISION OF CORPORATIONS
03 MAR 28 PM 1:13

SPECIAL INSTRUCTIONS

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Osprey Offshore Charters, LLC

ARTICLE II - Address:

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

1021 Gulfstream Way
Singer Island, FL 33404

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

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

Rhonda Owens

Name

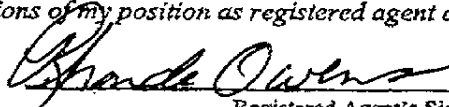
1021 Gulfstream Way

Florida street address (P.O. Box **NOT** acceptable)

Singer Island FL 33404

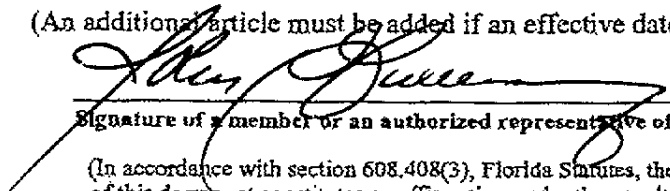
City, State, and Zip

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 Agent's Signature

(An additional article must be added if an effective date is requested)



Signature of a member or an authorized 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 perjury that the facts stated herein are true.)

John Gudelsky

Typed or printed name of signer

Filing Fees:

- \$100.00 Filing Fee for Articles of Organization
- \$ 25.00 Designation of Registered Agent
- \$ 30.00 Certified Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
03 MAR 28 PM 1:13