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03 MAY -5 PM 1:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

TRANSMITTAL LETTER

Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

SUBJECT: OCEAN PORT MARINA, LLC

Enclosed is an original and two (2) copies of the articles of organization and a check for:

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

From: David W. Starr
209 N. Atlantic Avenue, Suite 7
Cocoa Beach, Florida 32931
(321) 868-4580

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:
OCEAN PORT MARINA, LLC

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:
209 N. Atlantic Avenue, Suite 7, Cocoa Beach, Florida 32931

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

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

David W. Starr

Name

209 N. Atlantic Avenue, Suite 7

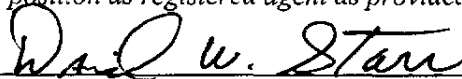
Florida street address (P.O. Box NOT acceptable)

Cocoa Beach

FL 32931

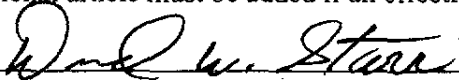
City, State, and Zip

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.)

David W. Starr

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)

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03 MAY -5 PM 1:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA