

LO4000004142

(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:

Name	
Availability	
Examiner	<i>Walt</i>
Director	
Verifier	
Acknowledgment	
A. P. Verifier	

FF \$125
cc 30



400022374084

01/13/04--01001--024 **76.25

09/10/03--01013--008 **78.75

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
04 JAN -9 PM 3:19

*Frye
meal*

*Walt
1/15/04*

W03-3857

*155.00
30
125.00
78.75

\$176.25*

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Full Net Charters LLC.
(Name of Limited Liability Company)

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Edward Sheldon Woodall
(Name of Person)

Full Net Charters LLC
(Firm/Company)

2098 Indigo Dr.
(Address)

NAVARE FL. 32566
(City/State and Zip Code)

For further information concerning this matter, please call:

Eddie Woodall at 850, 936-8203
(Name of Person) (Area Code & Daytime Telephone Number)

STREET ADDRESS:
Registration Section
Division of Corporations
409 E. Gaines Street
Tallahassee, Florida 32399

MAILING ADDRESS:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood
Secretary of State

December 22, 2003

EDWARD S. WOODALL
2098 INDIGO DR.
NAVARRE, FL 32566

SUBJECT: FULL NET CHARTERS, L.L.C.
Ref. Number: W03000030857

We have received your document for FULL NET CHARTERS, L.L.C. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

As of today's date, we have not received the "Articles of Organization" as promised for the above referenced limited liability company. Enclosed please find the appropriate form for you to complete and return with your check made payable to the Florida Department of State for the appropriate amount.

The total amount due is \$155.00.

There is a balance due of \$76.25.

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) 245-6911.

Brenda Tadlock
Senior Section Administrator

Letter Number: 503A00068235

**ARTICLES OF ORGANIZATION
FOR
FLORIDA LIMITED LIABILITY COMPANY**

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
04 JAN -9 PM 3: 19

ARTICLE I - Name:

The name of the Limited Liability Company is:

Full Net Charters LLC

ARTICLE II - Address:

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

Principal Office Address:

2098 Indigo Dr.
NAVAJUE, FL. 32566

Mailing Address:

2098 Indigo Dr.
NAVAJUE, FL. 32566

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

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

Edward S. Woodall
Name

2098 Indigo Dr.

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

NAVAJUE, FL. FLORIDA 32566
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, Florida Statutes..

Woodall

Registered Agent's Signature

ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

Title:

"MGR" = Manager

"MGRM" = Managing Member

President

Name and Address:

Edward J. Woodall

2098 Indigo Dr

Nashville FL 32566

(Use attachment if necessary)

NOTE: An additional article must be added if an effective date is requested.

REQUIRED SIGNATURE:

Edward J. Woodall

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.)

Edward J. Woodall

Typed or printed name of signee

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)