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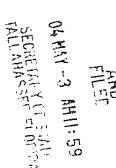
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PICK-UP	☐ WAIT	MAIL
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(Do	ocument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



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# TRANSMITTAL LETTER

TO: Registration Section Division of Corporations	·
SUBJECT: Boats United, LLC (Name of	of Limited Liability Company)
The enclosed Articles of Organization and fee	e(s) are submitted for filing.
Please return all corr	respondence concerning this matter to the following:
Ari Cohen	
	(Name of Person)
Boats United LLC	
	(Firm/Company)
1670 North 42nd Circle #105	
	(Address)
Vero Beach FL 32967	
· · · · · · · · · · · · · · · · · · ·	(City/State and Zip Code)
For further information concerning this matter	er, please call:
Robert Mullaney	at ( 289 ) 6991089
(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

04 MAY -3 AM 11: 59
SECRETARY OF STATE
SECRETARY OF STATE
SECRETARY OF STATE

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

Boats United LLC	<u>c</u>		
ARTICLE II - The mailing add		e principal office of the Limited Liability Company i	s:
Principal Offic		Mailing Address:	
1670 North 42nd	l Circle	1670 North 42nd Circle	
#105		#105	
Vero Beach, FL	32967	Vero Beach, FL 32967	
	the Florida street address of the	red Office, & Registered Agent's Signature: ne registered agent are:	
	the Florida street address of the Ari Cohen	ne registered agent are:	
	the Florida street address of the Ari Cohen  Na  1670 North 42nd Circle #1	me O5 (P.O. Box NOT acceptable)  TALLAHAR  VARIABLE TAR	FILE
	Ari Cohen  Na  1670 North 42nd Circle #1  Florida street address  Vero Beach	me O5 (P.O. Box NOT acceptable)  TALLAHAR  VARIABLE TAR	FILED
	Ari Cohen  Na  1670 North 42nd Circle #1  Florida street address  Vero Beach	me O5 (P.O. Box NOT acceptable)  TALLAHAR  VARIABLE TAR	FILE:
The name and the desirect of the second of the second of the place designed to act in this capact and complete performants.	Ari Cohen  Na  1670 North 42nd Circle #1  Florida street address  Vero Beach  City, Statestignated in this certificate, I hereity. I further agree to comply note of my duties, and I am fam.	me O5 (P.O. Box NOT acceptable)  TALLAHAR  VARIABLE TAR	<b>*</b> II: 59

Page 1 of 2 (CONTINUED)

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

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

Title:	Name and Address:
"MGR" = Manager	
"MGRM" = Managing Me	ember
MGRM	Ari Cohen
	1670 North 42nd Circle #105
	Vero Beach Fl 32967
MGRM	Robert Mullaney
<u> </u>	1019 D Southeast 23rd Place
	Cape Coral, Fl 33990-1957
	<u></u>
(Use attachment if necess	ary)
NOTE: An additional a	rticle must be added if an effective date is requeste
REQUIRED SIGNATU	RE:
	0
	a
Signature of a	member or an authorized representative of a member.
of this docume	with section 608.408(3), Florida Statutes, the execution at constitutes an affirmation under the penalties of perjury ated herein are true.)
Ac:	Cohen
	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)