

L04000049313

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

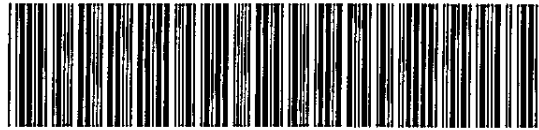
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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Sub. of Justice
TALLAHASSEE, FLORIDA

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LAW OFFICES
SHULER AND SHULER

34 FOURTH STREET
POST OFFICE DRAWER 850
APALACHICOLA, FLORIDA 32329

TELEPHONE: (850) 653-9226
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J. GORDON SHULER
THOMAS M. SHULER
—
OF COUNSEL
ALFRED O. SHULER

June 28, 2004

Florida Department of State
Division of Corporations
Post Office Box 6327
Tallahassee, Florida 32314

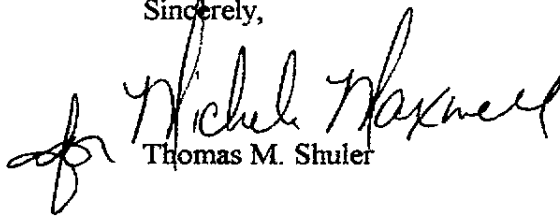
Re: Oyster Town Boatworks, LLC

Dear Sir/Madam:

Enclosed you will find the Articles of Incorporation for Oyster Town Boatworks, LLC. You will also find a check payable to the Secretary of State in the amount of \$125.00, for you filing fee.

Thank you for your attention to this, and please let me know if you need any additional information.

Sincerely,


Thomas M. Shuler

TMS:mm
Enc: as stated

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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:

Oyster Town Boatworks, LLC

ARTICLE II - Address:

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

Principal Office Address:

329 Water Street

Apalachicola, Fl 32320

Mailing Address:

329 Water Street

Apalachicola, Fl 32320

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

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

Selena Phipps

Name

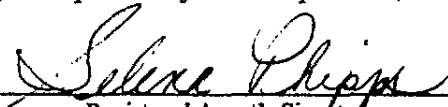
329 Water Street

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

Apalachicola FLORIDA 32320

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..



Registered Agent's Signature

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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

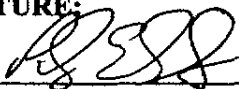
Name and Address:

MGRM	Richard Sand
	329 Water Street
	Apalachicola, FL 32320

(Use attachment if necessary)

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

REQUIRED SIGNATURE:



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.)

Richard Sand

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)

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TALLAHASSEE, FLORIDA