

L05000012502

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

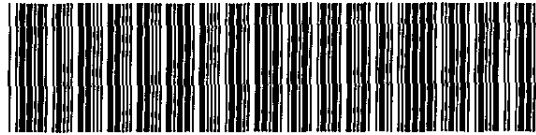
Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

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137K



800045708858

02/09/05 08:59 AM ***

FILED
05 FEB -7 AM 7:59
RECEIVED
05 FEB -7 PM 4:19
SAC, TAMPA
FALLS COUNTY, FLORIDA
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

(CLAUDE R. WALKER, ESQ.)

HUEY, GUILDAY & TUCKER, P.A.

P. O. BOX 12500

TALLAHASSEE, FL 32317-2500

Address

Attn: Julie

224-7091

City/State/Zip

Phone #

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known)

1. Bluewater Ventures, LLC

(Corporation Name)

(Document #)

2.

(Corporation Name)

(Document #)

3.

(Corporation Name)

(Document #)

4.

(Corporation Name)

(Document #)

☒ Walk in

☐ Mail out

☒ Pick up time

☐ Will wait

☐ Photocopy

☐ Certified Copy

☐ Certificate of Status

NEW FILINGS	
<input type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input checked="" type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/ Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/ QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

\$12500 filing fee

**ARTICLES OF ORGANIZATION FOR
BLUEWATER VENTURES, LLC
FLORIDA LIMITED LIABILITY COMPANY**

FILED
05 FEB -7 AM 7:59
STATE
TALLAHASSEE, FLORIDA

ARTICLE I - Name:

The name of the Limited Liability Company is BlueWater Ventures, LLC.

ARTICLE II - Address:

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

Principal Office Address:

318 Jefferson Circle, N.E.
Atlanta, GA 30328

Mailing Address:

Same

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

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

Name:
Florida street address:
City, State and Zip Code

J. KENDRICK TUCKER
1983 Centre Pointe Blvd., Suite 200
Tallahassee FL 32308

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..


J. KENDRICK TUCKER

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

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

Title:

AMRG@ = Manager

AMGRM@ = Managing Member

Name and Address:

MGRM

BRITTANY MASSEY
318 JEFFERSON CIRCLE, N.E.
ATLANTA, GAL 30328

REQUIRED SIGNATURE:

Signature of a member or an authorized representative of a member:


BRITTANY MASSEY

(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.)