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2005 JUN 14 F		
SECRETARY OF STATE SECRETARY OF STATE (Requestors Warne)		
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TRANSMITTAL LETTER

FILED

TO: Registration Section Division of Corporations 2005 JUN 14 P 1: 26 SECRETARY OF STATE TALLAHASSEE, FLORIDA SUBJECT: Sterncastle Productions, 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: Kim Fisher, President (Name of Person) Atocha Treasure Tours (Firm/Company) 200 Greene Street (Address) Key West, FL 33040 (City/State and Zip Code) For further information concerning this matter, please call: Elishea Strickland (Name of Person) Enclosed is a check for the following amount: ☐ \$125.00 Filing Fee ☐ \$130.00 Filing Fee & □ \$155.00 Filing Fee & **□** \$160.00 Filing Fee,

Certified Copy

(additional copy is enclosed)

STREET ADDRESS:

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

Certificate of Status

MAILING ADDRESS:

Certificate of Status &

Certified Copy (additional copy is enclosed)

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

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ARTICLE I - Name: The name of the Limited Liability Compa	TALLAHASSEE.

Sterncastle Productions, LLC	
ARTICLE II - Address:	
	f the principal office of the Limited Liability Company is
Principal Office Address:	Mailing Address:
200 Greene Street	200 Greene Street
200 Cicciic Cacci	200 0100110 011001
Key West, FL 33040	Key West, FL 33040
Key West, FL 33040	Key West, FL 33040
Key West, FL 33040	
Key West, FL 33040	istered Office, & Registered Agent's Signature:
Key West, FL 33040 ARTICLE III - Registered Agent, Reg	istered Office, & Registered Agent's Signature:
Key West, FL 33040 ARTICLE III - Registered Agent, Registered address of the name and the Florida street address of the name and	istered Office, & Registered Agent's Signature:
Key West, FL 33040 ARTICLE III - Registered Agent, Registered address of the name and the Florida street address of the name and	istered Office, & Registered Agent's Signature: of the registered agent are:
Key West, FL 33040 ARTICLE III - Registered Agent, Registered address of Kim Fisher 200 Greene Street	istered Office, & Registered Agent's Signature: of the registered agent are:
Key West, FL 33040 ARTICLE III - Registered Agent, Registered address of Kim Fisher 200 Greene Street	istered Office, & Registered Agent's Signature: of the registered agent are:

Registered Agent's Signature

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..

(CONTINUED)

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

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

FILED

<u>Title:</u> "MGR" = Manager	Name and Address:	2005 JUN 14 P : 21
"MGRM" = Managing Member		SECRETARY OF STATE TALLAHASSEE. FLORID
MGR	Kim Fisher	TALLAHASSEE, FLORID
	200 Greene Street	
	Key West, FL 33040	
MGRM	Juanita "Lee" Fisher	
	200 Greene Street	
	Key West, FL 33040	
		·.
		
(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.)

Kim Fisher, President

Typed or printed name of signee

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)