Sent By: RCPA;

Division of Corporations

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Florida Department of State

Division of Corporations Public Access System

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Division of Corporations

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From:

Account Name : RONALD CUTLER Account Number : 12000000005 Phone 1 (904)788-4480

Fax Number : (386)788-6040

FEORIDA/FOREIGN LIMITED LIABILITY CO.

Daytona Beach Jet Boat Adventures LLC

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ARTICLES OF ORGANIZATION FOR FLORIDA

	LIMITED LEABILITY COMPANY	
ARTICLE 1 - Name: The name of the Limited Lis	ability Company is: Daytona Beach Jet Boat Adventures LLC	
ARTICLE II - Address: The mailing address and stre	eet address of the principal office of the Limited Liability Company is:	
Principal Office Address:	Mailing Address:	
112 Rains Dr. Ponce Inlet, FL 32127	Same as principal address	
	Agent, Registered Office, & Registered Agent's Signature: rect address of the registered agent are: Ronald Cutler Name 1172 Pelican Bay Drive	06 MA
	Ronald Cutler	
	Name	· -
	Lati	. <u></u>
	1172 Pelican Bay Drive	三
	Florida street address (P.O. Box NOT acceptable)	- 19:33 - 19:33
	Destrue Parak Fileda 20110	
	Daytona Beach. Florida 32119 City, State, and Zip	$\stackrel{-}{=}$ \approx
	City, State, and Zip	, , , , ,
Having been named as	registered agent and to accept service of process for the above stated limited li	ability
	lesignuted in this vertificate. I hereby accept the appointment as registered age:	
agree to act in this cape	acity. I further agree to comply with the provisions of all statutes relating to the p	roper
and complete performs	ence of my duties, and I am familiar with and accept the obligations of my posit	ion as
	vide d for in Chapter 608, F.S	
`	Mara well	
	Registered Agent's Signature	
	A control of the State of Stat	
ARTICLE IV - Manager(s)		
The name and address of cac	chManager or Managing Member is as follows:	
Tide:	Name and Address:	
"MGR" = Manager	··· ·· ·· ·· ·· ·· ·· ·· ·· ·· ·· ·· ··	
"MGRM"= Managing Mcmb	ber	
"MGRM"	Timothy Sensing	
	112 Rains Drive	
	Ponce Inlets, FL 32127	

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ARTICLE IV - CONTINUED

"MGRM" Sarah Şensenig
112 Rains Drive
Ponce Inlet, FL 32127

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.)

Timothy Sensenig
Typed or printed name of signee

SECKLERANT OF STATE

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