

L06000065929

(Requestor's Name)

(Address)

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(City/State/Zip/Phone #)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

W06-27833

Sam



FLORIDA DEPARTMENT OF STATE
Division of Corporations

June 20, 2006

RICHARD BAKER
7493 PINE LAKE CIR
MILTON, FL 32570

SUBJECT: LUCK E STRIKE DEEPSEA FISHING CHARTER
Ref. Number: W06000027833

We have received your document for LUCK E STRIKE DEEPSEA FISHING CHARTER and your check(s) totaling \$. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of a Limited Liability Company must end with the words "Limited Company" or Limited Liability Company or with one of the following abbreviations Ltd. Co., LC, "L.C.," LLC, or L.L.C.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6851.

Gina McLeod
Document Specialist

Letter Number: 306A00041249

Richard Baker
7493 Pine Lake cr.
Milton Fl. 32570
850-626-0614

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is: Luck E Strike Deep Sea fishing charter LLC.

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:
7493 PINE LAKE CIR. Milton FL 32570

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

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

Richard Baker

Name

7493 PINE LAKE CIR.

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

Milton

FL

32570

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, F.S.

[Signature]
Registered Agent's Signature

(An additional article must be added if an effective date is requested)

[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.)

ALAN BAKER

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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