

L06000115920

00789-00524-00671

med articles not op. agree

Witold Biegaj

(Requestor's Name)

127 Oak Promenade Court

(Address)

Davenport, FL 33896

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

12/4

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W06-50726



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11/17/06--01025--005 \*\*125.00

FILED  
06 DEC -11 AM 11:30  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

November 20, 2006

WITOLD BIEGAJ  
127 OAK PROMENADE COURT  
DAVENPORT, FL 33896

SUBJECT: EASY SCUBA DIVING, LLC  
Ref. Number: W06000050726

We have received your document for EASY SCUBA DIVING, LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You must complete the attached Articles of Organization for this Limited Liability Company. We do not file the Operating Agreement, this is for your records.,

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) 245-6967.

Michelle Hodges  
Document Specialist

Letter Number: 806A00067589

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: EASY SCUBA DIVING, 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:

WITOLD BIEGAT  
(Name of Person)

EASY SCUBA DIVING, LLC.  
(Firm/Company)

127 OAK PROMENADE CT  
(Address)

DAVENPORT, FL 33896  
(City/State and Zip Code)

For further information concerning this matter, please call:

WITOLD

(Name of Person)

at ( 863 ) 420-0040

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

☐ \$125.00 Filing Fee

☐ \$130.00 Filing Fee &  
Certificate of Status

☐ \$155.00 Filing Fee &  
Certified Copy  
(additional copy is enclosed)

☐ \$160.00 Filing Fee,  
Certificate of Status &  
Certified Copy  
(additional copy is enclosed)

**Mailing Address**

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

**Street/Courier Address**

Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

### ARTICLE I - Name:

The name of the Limited Liability Company is:

EASY SCUBA DIVING LLC,

(Must end with the words "Limited Liability Company," "Limited Company" or their abbreviation "LLC," or "L.C.,")

### ARTICLE II - Address:

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

#### Principal Office Address:

127 OAK PROMENADE CT  
DAVENPORT, FL 33896

#### Mailing Address:

127 OAK PROMENADE CT  
DAVENPORT, FL 33896

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

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

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

WITOLD BIEGAJ

Name

127 OAK PROMENADE CT

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

DAVENPORT FL 33896

City, State, and Zip

06 DEC-14 AM 11:30  
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SECRETARY OF STATE  
TALLAHASSEE FLORIDA

*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..*

Witold Biegaj

Registered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

**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:**

MGR

WITOLD BIEGAT  
127 OAK PROMENADE CT  
DAVENPORT, FL 33896

(Use attachment if necessary)

**ARTICLE V:** Effective date, if other than the date of filing: \_\_\_\_\_ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

**REQUIRED SIGNATURE:**

Witold Biegat

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.)

WITOLD BIEGAT

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)**