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(Re	equestor's Name)			
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PICK-UP	☐ WAIT	MAIL		
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(Do	ocument Number)			
Certified Copies	Certificates	of Status		
Special Instructions to	Filing Officer:			
		DB		

Office Use Only

EFFECTIVE DATE 5-13-07



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O7 MAY 10 PH 12: LO
SECRETARY OF STATE
TALLAHASSEE, FIORIGA

COVER LETTER

TO:	Registration Se Division of Co					
SUBJI	ECT: POLA	R BOAT, LLC (Name of Limite	d Liability Compa	nny)		_
The en	closed Articles of	f Organization and fee(s) are s	ubmitted for filing	3 .		
Please	return all corresp	ondence concerning this matte	er to the following	;		
	JONATHA	AN E. GUNN				
		(Name of Person)			
	POLAR B	OAT LLC			7	
		((Firm/Company)		0.0	7
	7990 SO	UTHWEST 78 S	TREET		RE I'AI AHAS	AY
			(Address)		ino Ser	
	MIAMI, F	LORIDA 3314	3		FLO	PH 12:L
		(City	/State and Zip Code	:)	20.5	0
For fur	ther information	concerning this matter, please	call:		. ,	
JON	IATHAN E.	GUNN	at (786	566-35	22	
	(Name	of Person)	(Area Cod	e & Daytime T	elephone Number)	
Enclos	sed is a check fo	or the following amount:				
□ \$12:	5.00 Filing Fee	✓ \$130.00 Filing Fee & Certificate of Status	\$155.00 Find Certified Copy (additional copy)	•	\$160.00 Fill Certificate of S Certified Copy (additional copy is	Status &
		Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Registrati Division Clifton B 2661 Exe	ourier Addression Section of Corporation wilding secutive Centersee, FL 32301	ns	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

POLAR BOAT, 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 o	f the principal office of the Limited Liability Compan
Principal Office Address:	Mailing Address:
7990 SOUTHWEST 78 STREET	7990 SOUTHWEST 78 STREET
MANUELODIDA 20440	
ARTICLE III - Registered Agent, Reg	istered Office, & Registered Agent's Signature: vn Registered Agent. You must designate an individual or another
ARTICLE III - Registered Agent, Reg (The Limited Liability Company cannot serve as its o business entity with an active Florida registration.)	istered Office, & Registered Agent's Signature: vn Registered Agent. You must designate an individual or another
ARTICLE III - Registered Agent, Reg (The Limited Liability Company cannot serve as its o business entity with an active Florida registration.)	istered Office, & Registered Agent's Signature: vn Registered Agent. You must designate an individual or another of the registered agent are: E CPA Registered Agent's Signature: AGENTAL AGENTAL
ARTICLE III - Registered Agent, Reg (The Limited Liability Company cannot serve as its o business entity with an active Florida registration.) The name and the Florida street address	istered Office, & Registered Agent's Signature: wn Registered Agent. You must designate an individual or another of the registered agent are: E CPA Name Name
ARTICLE III - Registered Agent, Reg (The Limited Liability Company cannot serve as its o business entity with an active Florida registration.) The name and the Florida street address GLORIA M. BATUL	istered Office, & Registered Agent's Signature: wn Registered Agent. You must designate an individual or another of the registered agent are: E CPA Name
ARTICLE III - Registered Agent, Reg (The Limited Liability Company cannot serve as its o business entity with an active Florida registration.) The name and the Florida street address GLORIA M. BATUL 782 N LE JEUNE	istered Office, & Registered Agent's Signature: wn Registered Agent. You must designate an individual or another of the registered agent are: E CPA Name
(The Limited Liability Company cannot serve as its o business entity with an active Florida registration.) The name and the Florida street address GLORIA M. BATUL 782 N LE JEUNE	istered Office, & Registered Agent's Signature: vn Registered Agent. You must designate an individual or another of the registered agent are: E CPA Name

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..

Registered Agent's Signature (REQUIRED)

EFFECTIVE DATE 51307

ARTICLE I - Name:

(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 Mer	Name and Address:
	MGRM	MICHAEL TAYLOR 1250 102 Stud BAY HARBOR Fla. 33154
	MGRM	MARGO TAYLOR 1250 102 Stuit
	MGRM	JONATHAN E. GUNN 7990 SOUTHWEST 78 STREET MIAMI, FLORIDA 33143
	MGRM	GLORIA M. BATULE CPA 782 N LE JEUNE ROAD SUITE 528 MIAMI, FLORIDA 33126
	(Use attachment if necessar	у)
(If a		er than the date of filing: MAY 13, 2007 (OPTIONAL) te must be specific and cannot be more than five business days prior 3.)
	REQUIRED SIGNATUR	E:
	(In accorda of this doc	of a member or an authorized representative of a member of a membe
	that the i	ACTS stated herein are true.) HAN E. GUNN Typed or printed name of signee ORD ORD TYPE TYP
	Filing Fees) A

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

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)