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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Atlantic Dock and Boat Lifts, 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:

Lloyd Bowers, Esquire
(Name of Person)
Wickersham & Bowers
(Firm/Company)
Post Office Drawer 2250
(Address)
Daytona Beach, FL 32115-2250
(City/State and Zip Code)

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For further information concerning this matter, please call:

Lloyd Bowers at (386) 252-3000
(Name of Person) (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
ATLANTIC DOCK AND BOAT LIFTS, LLC
(A Florida Limited Liability Company)**

ARTICLE I:

The name of the Florida Limited Liability Company is **Atlantic Dock and Boat Lifts, LLC**.

ARTICLE II:

The mailing address and street address of the principal office of the Florida Limited Liability Company are as follows:

Principal Office Address:

3645 Darby Road
New Smyrna Beach, Florida 32168

Mailing Address:

3818 Cardinal Boulevard
Port Orange, Florida 32127

ARTICLE III:

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

Jason Keesling
3818 Cardinal Boulevard
Port Orange, Florida 32127

Having been named as registered agent and to accept service of process for the above stated Florida 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.



JASON KEESLING

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ARTICLE IV:

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

<u>Title</u>	<u>Name and Address</u>
Managing Member	Jason Keesling 3818 Darby Road Port Orange, Florida 32127

In accordance with Section 608.408(3), Florida Statutes, I declare under penalty of perjury that the aforestated facts are true and correct.

Dated this 25 day of June, 2007.



JASON KEESLING

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TALLAHASSEE, FLORIDA