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то:	Registration S Division of Co				
SUBJI	BARE	FOOT ISLAND CH	HARTERS,	LLC	
ಎ೦ಶಾ	.CI:		ed Liability Comp		
The en	closed Articles o	f Organization and fee(s) are	submitted for filing	g.	
Please	return all corresp	ondence concerning this mat	ter to the following	î:	
	RANDOLF	PH W. VALENTIN			e er a
			(Name of Person)		
				· ·	
			(Firm/Company)		
	3687 DOF	RAL STREET		*	
	÷		(Address)		
	PALM HA	RBOR, FLORIDA			<u> </u>
		(Cid	y/State and Zip Code	2)	
For fur	ther information	concerning this matter, please	e call:		
RAN	IDOLPH W	/. VALENTIN	_at (727 (Area Cod	742-853	1
<u> </u>	(Name	of Person)	(Area Cod	c & Daytime Tele	phone Number)
Enclos	sed is a check fo	or the following amount:			
\$125.	00 Filing Fee	✓\$130.00 Filing Fee & Certificate of Status	S155.00 Filin Certified Co (additional cop	ру	\$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	Registrati Division Clifton B 2661 Exe	ourier Address ion Section of Corporations Building ecutive Center C see, FL 32301	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:
BAREFOOT ISLAND CHARTERS, LLC
(Must end with the words "Limited Liability Company, "L.L.C.," or "LLC

ARTICLE II - Address:

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

Principal Office Address:	Mailing Address:
3687 DORAL STREET	3687 DORAL STREET
PALM HARBOR, FLORIDA 34685	PALM HARBOR, FLORIDA 34685
ARTICLE III - Registered Agent, R (The Limited Liability Company cannot serve as its business entity with an active Florida registration.) The name and the Florida street address	·
RANDOLPH \	W. VALENTIN
	Name STDEET
3687 DORAL	SIRFFI
Florid	a street address (P.O. Box <u>NOT</u> acceptable)
DAIMUADDO	OR, FLORIDA 34685

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..

City, State, and Zip

Registered Agent's Signature (REQUIRED)

ARTICLE IV- Manager(s) or Managing Member(s):

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

Title:		Name and Address:	
"MGR" = Manag "MGRM" = Man			
MGR	<u>.</u>	RANDOLPH W. VALENTIN 3687 DORAL STREET PALM HARBOR, FLORIDA 34685	<u></u> ,
		TOTAL	
			
			
(Use attachment i	f necessary)		
CLE V: Effective of	late, if other than the da	ite of filing:	(OPTIONAL)
effective date is list 90 days after the da	ted, the date must be s	pecific and cannot be more than five b	ousiness days prio
,	J.		
REQUIRED SIG	GNATURE:		
	Signature of a member of	r an authorized representative of a member	- ·.

RANDOLPH W. VALENTIN

that the facts stated herein are true.)

Typed or printed name of signee

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury

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)