81280000801

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
220

Office Use Only



000113413360

12/28/07--01023--015 **125.00

08 JAN -2 PH 3: I

G. MCLEOD

JAN 11 2008

EXAMINER

13000 GE

COVER LETTER

TO:	Registration Section Division of Corporations				
SURIE	ECT: CYSLLC.				
30001		ited Liability Company)			
The enclosed Articles of Organization and fee(s) are submitted for filing.					
Please return all correspondence concerning this matter to the following:					
	James Cooper				
		(Name of Person)			
	CYSLLC.				
	(Firm/Company)				
	3633 Oakbrook lane				
		(Address)			
	Panama City FL 32408				
	· · · · · · · · · · · · · · · · · · ·	ity/State and Zip Code)			
For further information concerning this matter, please call:					
James Cooper _{at (} 850) 258 0758					
	(Name of Person)	(Area Code & Daytime Telephone Number)			
Enclos	sed is a check for the following amount:				
√ \$125.	.00 Filing Fee \$\times \text{\$130.00 Filing Fee & Certificate of Status}	S155.00 Filing Fee & S160.00 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			

مي المسيد

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:	·
Cooper Yacht Service LLC. (Must end with the words "Limited Liability)	ty Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the pri	ncipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
3633 Oakbrook Lane Panama City FL, 32408	3633 Oakbrook Lane Panama City FL. 32408
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Regista business entity with an active Florida registration.)	erred Agent. You must designate an individual or another 8
The name and the Florida street address of the re	egistered agent are:
James E Cooper	70
Name	
3633 Oakbrook Lane	ress (P.O. Boy NOT acceptable)
Florida street add	ress (P.O. Box NOT acceptable)
Panama City FL, 324	98
City. State, a	nd 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..

Registered Agent's Signature (REQUIRED)

(CONTINUED)
Page 1 of 2

بهرام اسم. زا

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

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

	<u>Title:</u> "MGR" = Manager	Name and Address:
	"MGRM" = Managing Mem	ber
	MGRM	James E Cooper 3633 Oakbrook Lane
		Panama City FL, 32408
•	MGRM	Paula R Cooper 3633 Qakbrook Lane
	MOVIM	Panama City FL, 32408
		•
•		
	(Use attachment if necessary)
(If an		than the date of filing: Jan 1, 2008 (OPTIONAL) e must be specific and cannot be more than five business days prior
	• • • • • • • • • • • • • • • • • • •	,
	REQUIRED 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.)

James E Cooper

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)