

L08000005054

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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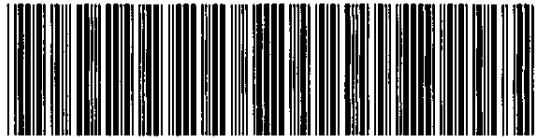
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
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J. BRYAN

JAN 15 2008

EXAMINER

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: WHOPPER STOPPER CHARTERS, 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:

JILL E. BROWNLOW
(Name of Person)

(Firm/Company)

PO BOX 432004
(Address)

BIG PINE KEY, FL 33043
(City/State and Zip Code)

For further information concerning this matter, please call:

JILL E. BROWNLOW at (305) 515-0015
(Name of Person) (Area Code & Daytime Telephone Number)

STREET ADDRESS:
Registration Section
Division of Corporations
409 E. Gaines Street
Tallahassee, Florida 32399

MAILING ADDRESS:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

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**ARTICLES OF ORGANIZATION
FOR
FLORIDA LIMITED LIABILITY COMPANY**

ARTICLE I - Name:

The name of the Limited Liability Company is:

WHOPPER STOPPER CHARTERS, LLC

ARTICLE II - Address:

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

Principal Office Address:

~~29055 PINE AVE~~ ³⁸⁰⁷ DYER RD

BIG PINE KEY, FL 33043

Mailing Address:

PO BOX 432004

BIG PINE KEY, FL 33043

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

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

JILL E. BROWNLOW

Name

~~29055 PINE AVE~~ 3807 DYER RD.

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

BIG PINE KEY FLORIDA 33043

City, State, and Zip

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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, Florida Statutes..



Registered Agent's Signature

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:

MGRM

JILL E. BROWNLOW

~~29055 PINE AVENUE~~ 3007 DYER ST.

BIG PINE KEY, FL 33043

MGRM

MICHAEL L. METCALF

~~29055 PINE AVENUE~~

BIG PINE KEY, FL 33043

MGR

MJ REEL LAND & SEA DEALS, INC.

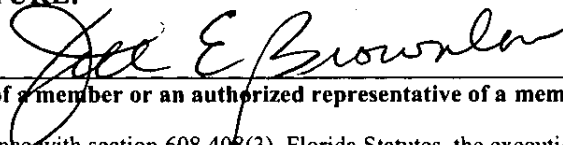
12 W MESQUITE BLVD STE 108

MESQUITE, NV 89027

(Use attachment if necessary)

NOTE: An additional article must be added if an effective date is requested.

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.)

JILL E. BROWNLOW

Typed or printed name of signee

Filing Fees:

\$100.00 Filing Fee for Articles of Organization

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)

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