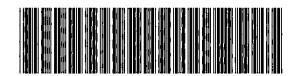
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(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
CW8-3456

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01/18/08--01026--002 **70.00

02/07/08--01001--015 **55.00

Effective Date 2 1 08

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B. Tadlock FEB 0 7 2008



January 22, 2008

JERFF WOOD, AN 4967 SOUND VIEW DRIVE MT PLEASANT, SC 29466

SUBJECT: ANTARES YACHTS, INC.

Ref. Number: W08000003456

We have received your document for ANTARES YACHTS, INC. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Florida law requires the street address of the principal office and, if different the mailing address of the entity. A post office box is not acceptable for the principal office.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6928.

Tim Burch Regulatory Specialist II New Filing Section

Letter Number: 408A00004525

Attn.

12500 LLC Filing Fec 1ess Sent # 7000 W/ Corporation App

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Antaces Yachts, LLC (Name of Limited Liability Company)
(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:
JEFF WOOD MAN (Name of Person)
Antares Yachts, LLC (Firm/Company) 4967 Sound View Drive (Address) Mt. Pleasant, SC 29466 (City/State and Zip Code)
4967 Sound View Drive (Address)
Mt. Pleasant, SC 29466 (City/State and Zip Code)
For further information concerning this matter, please call:
(Name of Person) at (843) 200-1261 (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
\$125.00 Filing Fee \$\times \text{S130.00 Filing Fee & Certified Copy (additional copy is enclosed)} \$160.00 Filing Fee, 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
* Note: \$70.00 already filed w/ your office toward on incorporation which we no longer need. See letter out.
incorporation which we no longer need son letter out

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

1/18

ARTICLE I - Name:

The name of the Limited Liability Company is:	100	
The name of the Limited Liability Company is: Antares Yach ts. 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	y Company is:	
Principal Office Address: Mailing Address:		
1967 Sound View Dr. P.O. Box 11560 Mr. Pleasant, Sc 29466 Isia of Palms, Sc	<u> </u>	TG.
ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Sign (The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or business entity with an active Florida registration.)		DIVISION
The name and the Florida street address of the registered agent are:	1.	OF C
In Corp Services, Inc.	무	RY OF STATE CORPORATIONS
17000 1.7th / . 1/2		Ã₽
Florida street address (P.O. Box NOT acceptable)	1:09	

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.

(CONTINUED)
Page 1 of 2

Services, elne

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 "MGRM" = Managing Member	Name and Address:
MGRM	JEFF WOODMAN 4967 SOUND VIEW DRIVE MT PLEASANT, SC 29466
MGRM	ROB POIRIER 340 WATSON STREET WEST SUITE SOI WHITBY, ON LINGGI
(Use attachment if necessary)	
ARTICLE V: Effective date, if other than (If an effective date is listed, the date mus to or 90 days after the date of filing.)	the date of filing: $\frac{2/1/08}{}$. (OPTIONAL) at be specific and cannot be more than five business days prior
REQUIRED SIGNATURE:	
	A Woodman
(In accordance with of this document of	mber or an authorized representative of a member. In section 608.408(3), Florida Statutes, the execution constitutes an affirmation under the penalties of perjury
	FF WOODMAN 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)