

LU 80 000 39491

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

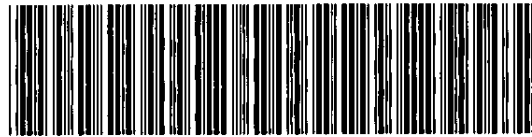
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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04/22/08--01006--013 \*\*125.00

RECEIVED  
08 APR 21 PM 4:51  
DEPT. OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

FILED  
08 APR 21 AM 8:30  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

B. KOHR

APR 22 2008

EXAMINER

CORPDIRECT AGENTS, INC. (formerly CCRS)  
515 EAST PARK AVENUE  
TALLAHASSEE, FL 32301  
222-1173

FILING COVER SHEET  
ACCT. #FCA-14

FILED  
08 APR 21 AM 8:30  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

CONTACT: ASHLEY SMITH

DATE: 04-21-2008

REF. #: 000399.85528

CORP. NAME: MALECOT MARINE SARASOTA, LLC

- |  |   |   |
|--|---|---|
| <input type="checkbox"/> ARTICLES OF INCORPORATION   | <input type="checkbox"/> ARTICLES OF AMENDMENT  | <input type="checkbox"/> ARTICLES OF DISSOLUTION      |
| <input type="checkbox"/> ANNUAL REPORT               | <input type="checkbox"/> TRADEMARK/SERVICE MARK | <input type="checkbox"/> FICTITIOUS NAME              |
| <input type="checkbox"/> FOREIGN QUALIFICATION       | <input type="checkbox"/> LIMITED PARTNERSHIP    | <input checked="" type="checkbox"/> LIMITED LIABILITY |
| <input type="checkbox"/> REINSTATEMENT               | <input type="checkbox"/> MERGER                 | <input type="checkbox"/> WITHDRAWAL                   |
| <input type="checkbox"/> CERTIFICATE OF CANCELLATION |   |   |
| <input type="checkbox"/> OTHER:                      |   |   |

STATE FEES PREPAID WITH CHECK# 525689 FOR \$ 125.00

AUTHORIZATION FOR ACCOUNT IF TO BE DEBITED:

\_\_\_\_\_ COST LIMIT: \$ \_\_\_\_\_

PLEASE RETURN:

- |  |   |  |
|--|---|--|
| <input type="checkbox"/> CERTIFIED COPY        | <input type="checkbox"/> CERTIFICATE OF GOOD STANDING | <input checked="" type="checkbox"/> PLAIN STAMPED COPY |
| <input type="checkbox"/> CERTIFICATE OF STATUS |   |  |

Examiner's Initials

# **ARTICLES OF ORGANIZATION**

MALECOT MARINE SARASOTA, LLC,  
a Florida limited liability company

FILED  
08 APR 21 AM 8:30  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

## **ARTICLE I NAME**

The business and affairs of the Limited Liability Company shall be conducted under the name of:

MALECOT MARINE SARASOTA, LLC

## **ARTICLE II PRINCIPLE OFFICE**

The street address and the mailing address of the principal place of business of the Limited Liability Company within the State of Florida shall be:

6111 142<sup>nd</sup> Ave., North  
Clearwater, FL 33760-2743

## **ARTICLE III INITIAL REGISTERED AGENT/OFFICE**

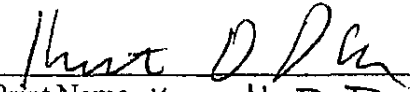
Todd Malecot  
6111 142<sup>nd</sup> Ave., North  
Clearwater, FL 33760-2743

## **ARTICLE IV MANAGEMENT AND POWERS**


The business and affairs of the Limited Liability Company shall be managed by one or more Managers elected as provided in the Operating Agreement and Regulations of the Limited Liability Company.

IN WITNESS WHEREOF, these Articles of Organization have been executed as of the  
21<sup>st</sup> day of April, 2008.

WITNESSES:

  
Print Name Kenneth D. Doerr

  
Todd Malecot

  
Print Name Lisa C. Ross

“AUTHORIZED REPRESENTATIVE”

**CERTIFICATE OF DESIGNATION OF  
REGISTERED AGENT/REGISTERED OFFICE**

Pursuant to the provisions of Section 608.415 of the Florida Statutes, the undersigned Limited Liability Company submits the following statements to designate a registered office and registered agent in the State of Florida.

1. The name of the Limited Liability Company is:

MALECOT MARINE SARASOTA, LLC

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

Todd Malecot  
6111 142<sup>nd</sup> Ave., North  
Clearwater, FL 33760-2743

Having been named 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 relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Date: 4/21/08

Todd Malecot  
Todd Malecot

"REGISTERED AGENT"