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SECRETARY OF STATE
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T. HAMPTON

MAY 2 9 2008

**EXAMINER** 

# **COVER LETTER**

TO: Registration Section Division of Corporations
SUBJECT: Condor Sailing Adventures (Name of Limited Diability Company)
The enclosed Articles of Organization and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Michael Kennedy Kirk (Name of Person)
Condor Sailing Adventures (Firm/Company)
1624 BULEVAR MENOR
Pensacola Beach, FL 3250432561 (City/State and Zip Code)
For further information concerning this matter, please call:
Michael Kirk at (850) 293-7305  (Name of Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
\$125.00 Filing Fee \$\ \times \text{\$130.00 Filing Fee & Certificate of Status} \text{\$Certified Copy (additional copy is enclosed)} \text{\$S160.00 Filing Fee, Certified of Status & Certified Copy (additional copy is enclosed)} \text{\$Certified Copy (additional copy is enclosed)} \$Certified
Mailing AddressStreet/Courier AddressRegistration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301

### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTIC	CLEI	- Name:	•
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The name of the Limited Liability Company is:

Condon Sailing Adventures LLC
(Must end with the words "Linkited 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:
1624 Bulevar Menor Pensacola Beach, FL	1624 Bulevar Menor Pensacola Beach, FL
Pensacola Beach, FL	Pensacola Beach, FL
32561	32561

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: (The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

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

Michael Kennedy Kirk

Name

1624 Bulevan Menon

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

Pensacola Beach FL 32561

City, State, and 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 (REOURED)

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Page 1 of 2

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## 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 - Managing Member	Michael Kennedy Kirk 1624 Bulevar Mcnor Pensacola Beach, FL 32506 32561	
(Use attachment if necessary)		
	e date of filing: (OPTIONAL) be specific and cannot be more than five business days price	or
REQUIRED SIGNATURE:		
Signature of a memb	Tel Lymnody Luk per 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.)

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)

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