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## **COVER LETTER**

TO:	Registration Division of C				
SURIE	<sub>CT</sub> . AN	GEL MARINE SAI	LES & CHARTERS, L	LC	
(Name of Limited Liability Company)					
The enc	losed Articles	of Organization and fee(s) are	submitted for filing.		
Please r	eturn all corres	spondence concerning this ma	tter to the following:		
	····	Pau	l F. Kimball		
			(Name of Person)		
ANGEL MARINE SALES & CHARTERS, LLC					
			(Firm/Company)		
_	2495 Cat Cay Lane				
		·	(Address)		
_			erdale, Florida 33312		
		(Ci	ty/State and Zip Code)		
For furth	ner information	concerning this matter, pleas	se call:		
	Paul F.	Kimball	at 206 391-408	4	
	(Nam	e of Person)	(Area Code & Daytime Tele	ephone Number)	
Enclose	ed is a check t	for the following amount:			
\$125.0	0 Filing Fee	\$130,00 Filing Fee & Certificate of Status	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 O Tallahassee, FL 32301		

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name	e:		
The name of the Lin	nited Liability Compa	any is:	
· ·		LES & CHARTERS, LLC	
(Mus	t end with the words "Limit	ed Liability Company, "L.L.C.," or "LLC.")	
ARTICLE II - Add The mailing address		f the principal office of the Limited	Liability Company is:
Principal Office Ad	<u>ldress:</u>	Mailing Address:	
2495 Cat Cay Lane		2495 Cat Cay Lane	
Fort Lauderdale, Florida	33312	Fort Lauderdale, Florida 33312	
(The Limited Liability Conbusiness entity with an ac	npany cannot serve as its over tive Florida registration.) Iorida street address of Paul F. K	istered Office, & Registered Agent on Registered Agent. You must designate an interpretate of the registered agent are:  imball, President  Name  Cat Cay Lane	dividual or another AHASSEE FLORIDA
-	Florida s	treet address (P.O. Box NOT acceptable)	
-		rdale, Florida 33312 , State, and Zip	
liability compan registered agent and statutes relating to	y at the place designa d agree to act in this o o the proper and comp ations of my position	and to accept service of process for to ted in this certificate, I hereby accept capacity. I further agree to comply we tolete performance of my duties, and I as registered agent as provided for in s Signature (REQUIRED)	t the appointment as with the provisions of all Tam familiar with and

(CONTINUED)
Page 1 of 2

## ARTICLE IV- Manager(s) or Managing Member(s): The name and address of each Manager or Managing Member is as follows:

Title:	Name and Address:
"MGR" = Manager	
"MGRM" = Managing Member	
0 0	
President MGR	Paul F. Kimball
	2495 Cat Cay Lane
	Fort Lauderdale, Florida 33312
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(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: #\(\text{UU(5)}\) 17, 2008 (OPTIONAL) (If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

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.)

Paul F. Kimball, President

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)