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2009 APR 13 PH 3: 17

C. LEWIS

APR 1 4 2009

EXAMINER

## **COVER LETTER**

то: •	Registration Section Division of Corporations
SUBJEC	CT: American Cruise & Travel Company LLC (Name of Limited Liability Company)
The encl	losed Articles of Organization and fee(s) are submitted for filing.
Please re	eturn all correspondence concerning this matter to the following:
-	MADELINE GAYNOR (Name of Person)
	AMERICAN CRUISE + TRAvel Company LLC (Firm/Company)
_	2034 Big Cypress Blud (Address)
_	LAKELAND, FL 33810 (City/State and Zip Code)
For furth	ner information concerning this matter, please call:
	(Name of Person) at (4)4) 855-0302 (Area Code & Daytime Telephone Number)
Enclose	d is a check for the following amount:
<b>]</b> \$125.0	O Filing Fee \$\sum_{\text{\$130.00 Filing Fee}} \& \sum_{\text{\$155.00 Filing Fee}} \& \sum_{\text{\$160.00 Filing Fee}} \& \cup \\ \text{Certificate of Status} \& \text{Certified Copy} \\ \text{(additional copy is enclosed)} \\ \text{Certified Copy} \\ \text{(additional copy is enclosed)} \end{additional copy is enclosed}
	Mailing AddressStreet/Courier AddressRegistration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallabassee FL 323142661 Executive Center Circle

Tallahassee, FL 32301

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the Limited Liability Company is:	
American Cruise + TRAU  (Must end with the words "Limited Liability	y Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the pri	ncipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
2034 Big Cypress Blud LAKeland, FL 33810	2034 Big Cypress Blud Laxeland, FL 33810
LAKeland,	gistered agent are:  GAYNOR  Cypress Blud ess (P.O. Box NOT acceptable)  FL 33810
liability company at the place designated in the registered agent and agree to act in this capacity. statutes relating to the proper and complete per	ccept service of process for the above stated limited is certificate, I hereby accept the appointment as I further agree to comply with the provisions of all formance of my duties, and I am familiar with and ered agent as provided for in Chapter 608, F.S

(CONTINUED) Page 1 of 2

## ARTICLE IV- Manager(s) or Managing Member(s):

FILED

<u>Title:</u>	Name and Address:	2089 APR 13 PI
"MGR" = Manager		SECRETARY OF
'MGRM" = Managing Member		SECRETARY OF MLLAHASSEE, F
MGRM	LARRY GAYNOR	:
	2034 Blig Cypress F	
	LAKELAID, FL 33	810
MGRM	Madeline Graywa	AP.
ived Klet	2034 Big Cypres	s Blud
	LAKELAND FL 33	810
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LE V: Effective date, if other than the fective date is listed, the date must be		
LE V: Effective date, if other than the fective date is listed, the date must be days after the date of filing.)  REQUIRED SIGNATURE:		han five business days

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

that the facts stated herein are true.)

- \$ 30.00 Certified Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)

MADELINE GAYNOR

Typed or printed name of signee