

# Florida Department of State

Division of Corporations Public Access System

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To :

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From:

Account Name

: DLA PIPER LLP (US)

Account Number : 120060000104

Phone

: (404)736-7833

Fax Number

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# FLORIDA/FOREIGN LIMITED LIABILITY CO.

## Gulf Bound Adventures, LLC

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### **COVER LETTER**

TO: Registration Division of C		
SUBJECT:		ind Adventures, LLC.
	Name of Limit	ed Liability Company
The enclosed Articles	of Organization and fee(s) are	submitted for filing.
Please return all corres	pondence concerning this matt	er to the following:
	Rebecca	Saferstein, Paralegal
		Table of Festiva
	DLA	Piper LLP (US)
		Firm/Company
	1201 W	/ Peachtree Street
		Address
	Atla	anta, GA 30309
	Cit	y/State and Zip Code
	rebecca.sa E-mail address: (to be used t	aferstein@dlapiper.com or luture annual report notification)
For further information	n concerning this matter, please	
	aferstein, Paralegal e of Person	at ( 404 ) 736-7833  Area Code & Daytime Telephone Number
Enclosed is a check t	for the following amount:	
Î\$125.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	S155.00 Filing Fee & S160.00 Filing Fee Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enc
•	Malling Address	Street/Courier Address
	Registration Section Division of Corporations	Registration Section Division of Carporations
	P.O. Box 6327 Tallahassee, FL 32314	Clifton Building 2661 Executive Center Circle
	19119192266" LP 37314	POOL EVACUTA C CONTO. CITCLE

Tallahassee, FL 32301

#### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:	•
Gulf Bound Adven (Must and with the words "Limited Liabil	otures, LLC. (ity Company, ""L.I.,C_" or "LLC.")
ARTICLE II - Address: The mailing address and street address of the pr	rincipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
525 67th Street Holmes Beach, FL 34217	2980 Rockingham Drive Atlanta, GA 30327
ARTICLE III - Registered Agent, Registered The Limited Liability Company cannot serve as its own Regist business entity with an active Plorida registration.)  The name and the Florida street address of the r  Kevin S. 1	registered agent are:
Name	
525 67th	Street
Florida street address (P.O.	
olmes Beach 34217 City, State, a	FL nd Zip
liability company at the place designated in t registered agent and agree to act in this capacit statutes relating to the proper and complete pe	accept service of process for the above stated limited this certificate, I hereby accept the appointment as y. I further agree to comply with the provisions of all arformance of my duties, and I am familiar with and stered agent as provided for in Chapter 608, F.S.,

(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 Memb	er
MGRM	Kevin S. Noland
American programme and the state of the stat	2980 Rockingham Drive
	Atlanta, GA 30327
MGRM	Lynn P. Noland
	2980 Rockingham Drive
	Atlanta, GA 30327
•	
(Use attachment if necessary)	
י או מאר אין או אין	A A A A A A A A A A A A A A A A A A A
LEV: Effective date, if other in	than the date offiling: (OPTIONAL must be specific and cannot be more than five business days
days after the date of filing.	must be specific and cannot be more man rive business days
REQUIRED SIGNATURE:	~ dray v / _ >
X ON	
September 01:	member or sularthorized representative of a member.
, ,	, , <del>, ,</del> , , ,
(In accordance	with section (0.08(3), Florida Statutes, the execution ent constitutes an affirmation under the penalties of perjury
	PRI CHINITHE AN ALITHIBUAN URAPETAR BODDILOS AL MENUTY
	stated herein are true.)

Filing Fees:

S125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)