

L09000106270

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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MAIL

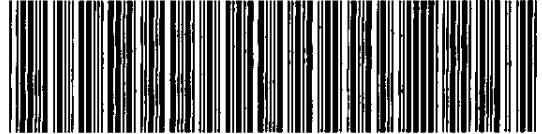
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



900161462289

Effective Date 10/10/09

10/16/09--01011--025 **125.00

FILED

09 OCT 16 AM 10:16

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

W09-46418
J. BRYAN OCT 19 2009

J. BRYAN

NOV - 4 2009

EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Island Hotel Management LLC
Name of Limited Liability Company

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Jason Jessee
Name of Person

I.H.M.
Firm/Company

1107 Key Plaza #333
Address

Key West, FL 33040
City/State and Zip Code

Island.hotel.management@gmail.com
E-mail address: (to be used for future annual report notification)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

For further information concerning this matter, please call:

Jason Jessee at (305) 360-1564
Name of Person Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

- ☒ \$125.00 Filing Fee ☐ \$130.00 Filing Fee & Certificate of Status ☐ \$155.00 Filing Fee & 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 Circle
Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE
Division of Corporations

October 19, 2009

JASON JESSEE
I.H.M.
1107 KEY PLAZA #333
KEY WEST, FL 33040

SUBJECT: ISLAND HOTEL MANAGEMENT LLC
Ref. Number: W09000046418

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

We have received your document for ISLAND HOTEL MANAGEMENT LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

Section 608.407, Florida Statutes, requires the document(s) to be signed by a member or by the authorized representative of a member.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6043.

Joey Bryan
Regulatory Specialist II

Letter Number: 409A00033305

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Island Hotel Management LLC

(Must end with the words "Limited Liability Company," "L.L.C.," or "LLC.")

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TALLAHASSEE, FLORIDA

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:

Mailing Address:

I.H.M.

1107 Key Plaza #333

Key West, FL 33040

I.H.M.

200 McBride Lane

Gretna, VA 24557

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.)

Effective Date 10/10/09

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

Jason Jessee

Name

1107 Key Plaza Suite 333

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

Key West, FL 33040 FL

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 (REQUIRED)

(CONTINUED)

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TALLAHASSEE, FLORIDA

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

The name and address of each Manager or Managing Member is as follows:

Title:

"MGR" = Manager

"MGRM" = Managing Member

Name and Address:

MGRM

Jason Jessee

1107 Key Plaza Ste.333

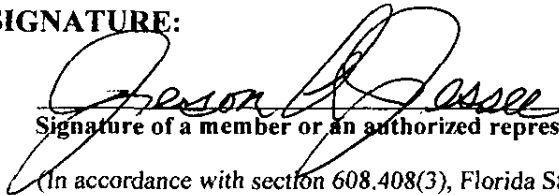
Key West, FL 33040

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: 10 Oct. 2009. (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.)

Jason A Jessee

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)