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SECRETARY OF STATE SIVISION OF CORPORATIONS

T. HAMPTON

JAN - 5 2310

EXAMINER

COVER LETTER

TO:	Registration Division of C			Dec 29, 20
SUBJI	_{ЕСТ:} <u>Joar</u>		d Breakfast Limited ted Liability Company	Liability Company
The en	closed Articles	of Organization and fee(s) are	submitted for filing.	
Please	return all corres	pondence concerning this mat	ter to the following:	
		Richa	ard and Joan Kark Name of Person	
	Jo	oan's Ark Boat Bed and	Breakfast Limited Liat	oility Company
		95	17 South U.S. 1	
		63	Address	
			t Lucie, Florida, 34952 ty/State and Zip Code	
		tean	nkark@verizon.net	
For fu	rther information	E-mail address: (to be used a concerning this matter, pleas	for future annual report notification	o n)
		r Richard Kark	at (772) Area Code & Daytime	359-5642 Telephone Number
Enclo	sed is a check t	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 Add Registration Section Division of Corpora Clifton Building 2661 Executive Cer Tallahassee, FL 323	ntions

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Nar The name of the Li	ne: imited Liability Company is	:
	oan's Ark Boat Bed an	d Breakfast L.L.C. lity Company," "L.L.C.," or "LLC.")
ARTICLE II - Ad The mailing address		rincipal office of the Limited Liability Company is
Principal Office A	Address:	Mailing Address:
8517 South U.S. Port Saint Lucie,		473 Severnside Drive Severna Park, Maryland, 21146
(The Limited Liability C		d Office, & Registered Agent's Signature: stered Agent. You must designate an individual or another
The name and the	Florida street address of the	registered agent are:
	William Po	embroke
	Name	
	8517 Sout	th U.S. 1
	Florida street address (P.C	
	Port Saint Lucie, FL. 34	9952 FL
	City, State,	
77 , 1	, , , , , , , , , , , , , , , , , , ,	

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)

JIVISION OF CORPERATIONS

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:

<u>Title:</u>		Name and Address:	
"MGR" = Mana "MGRM" = Ma	nger nnaging Member		
MGR		Joan Kark	
		473 Severnside Drive	
		Severna Park, MD. 21146	
MGR		Richard Kark	
		473 Severnside Drive	
	•	Severna Park, MD. 21146	
			
		37/10 -	
			_
		N-4 15-2 TAXABETATA	
(Use attachmen	t if necessary)		
(Ose attachmen	t it necessary)		
CLE V: Effective	e date, if other than the d	ate of filing:	(OPTIONAL
effective date is l	isted, the date must be	specific and cannot be more tha	n five business days
0 days after the	date of filing.)		
REQUIRED S	ICNATUDE.		_
<u>REQUIRED</u> S	IGNATURE.	01.1	willow
	Rich	and Kank /h	Mon
	Signature of a member	or an authorized representative of	member.
	(In accordance with secti of this document constit that the facts stated here	ion 608.408(3), Florida Statutes, the ex- utes an affirmation under the penalties in are true.)	ecution of perjury
		Richard Kark) 🕽 🐧 🗛	N RARK
	Typ	ed or printed name of signee	-
Filing Fee		ed or printed name of signee	

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

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