

L100000003397

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

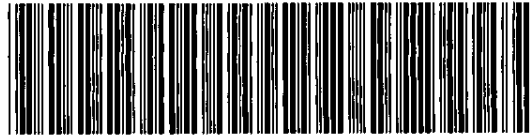
Certified Copies _____

Certificates of Status _____

Special Instructions to Filing Officer:

CORATFLAL

Office Use Only



000163910130

01/11/10--01002--018 **250.00

01/13/10--01006--019 **60.00

RECEIVED
10 JAN 11 PM 12:25
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

B. KOHR

JAN 11 2010

EXAMINER

FILED
10 JAN 11 PM 2:06
SECRETARY OF STATE
DIVISION OF CORPORATIONS

CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301
(850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

Fisherland Investments, LLC

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
10 JAN 11 PM 2:04

☐ Art of Inc. File _____
☐ LTD Partnership File _____
☐ Foreign Corp. File _____
☒ L.C. File _____
☐ Fictitious Name File _____
☐ Trade/Service Mark _____
☐ Merger File _____
☐ Art. of Amend. File _____
☐ RA Resignation _____
☐ Dissolution / Withdrawal _____
☐ Annual Report / Reinstatement _____
☐ Cert. Copy _____
☒ Photo Copy _____
☐ Certificate of Good Standing _____
☐ Certificate of Status _____
☐ Certificate of Fictitious Name _____
☐ Corp Record Search _____
☐ Officer Search _____
☐ Fictitious Search _____
☐ Fictitious Owner Search _____
☐ Vehicle Search _____
☐ Driving Record _____
☐ UCC 1 or 3 File _____
☐ UCC 11 Search _____
☐ UCC 11 Retrieval _____
☐ Courier _____

Signature _____

Requested by: Seth

01/11/10 11:00

Name

Date

Time

Walk-In _____

Will Pick Up _____

**ARTICLES OF ORGANIZATION
FOR**

Fisherland Investments, LLC

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
10 JAN 11 PM 2:06

The undersigned, for the purpose of forming a company under the Florida Limited Liability Act, hereby adopts the following Articles of Organization.

ARTICLE I: NAME

The name of the company is **Fisherland Investments, LLC**

ARTICLE II: PRINCIPAL OFFICE

The principal office and mailing address of the company is **700 Eleventh Street South PH2, Naples, FL 34102.**

ARTICLE III: INITIAL REGISTERED AGENT AND ADDRESS


The name and address of the initial registered agent is **Anthony R Able, Able Advisory, Inc.,
700 Eleventh Street South PH2, Naples, FL 34102.**

ARTICLE IV: MANAGEMENT

The name and address of the initial Manager of the company is:
AOMAC Properties, Inc., Manager, 700 Eleventh Street South PH2, Naples, FL 34102.

The undersigned has executed these Articles of Organization this 11th day of January 2010.

"Your Capital Connection, Inc. by, Seth Neeley, Client Representative"



Authorized Representative

CERTIFICATE OF DESIGNATION
REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of section 608.415, Florida Statutes, the mentioned company, organized under the laws of the state of Florida, submits the following statement in designating the registered office/registered agent, in the state of Florida.

1. The name of the company is: **Fisherland Investments, LLC**
2. The name and street address of the registered agent and office is:

Anthony R Able, Able Advisory, Inc., 700 Eleventh Street South PH2, Naples, FL 34102.

HAVE BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED 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.

/S/ **Anthony R . Able**