## L10000104875

(Requestor's Name)		
(Address)		
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(City/State/Zip/Phone #)		
PICK-UP WAIT MAIL		
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(Business Entity Name)		
(Document Number)		
Certified Copies Certificates of Status		
Special Instructions to Filing Officer:		





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TO LI LO

SECRETARY OF STATE DIVISION OF CORPORATION

N. Culligan OCT - 7 2010

## **COVER LETTER**

TO:

Registration Section
Division of Corporations

SUBJECT: Richleigh Yachts Management
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:
Nancy Comparato
Name of Person
Richleigh Yachts Management
Firm/Company
1112 Weston Road, Suite 165
Address
Weston, Florida 33326
City/State and Zip Code
nancy@richleighyachts.com  E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Q54
Nancy Comparato at (954) 629-9401 or 432-4889
Name of Person Area Code & Daytime Telephone Number
Enclosed is a check for the following amount:
\$125.00 Filing Fee \$\sum \text{\$130.00 Filing Fee & Certificate of Status}\$  \$155.00 Filing Fee & \$\text{\$160.00 Filing Fee, Certified Copy (additional copy is enclosed)}}\$  \$160.00 Filing Fee, Certified Copy (additional copy is enclosed)
Mailing AddressStreet/Courier AddressRegistration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:		
The name of the Limited Liability Company is	:	
Richleigh Yachts Managemer	nt, LLC	
(Must end with the words "Limited Liabi	ility Company, "L.L.C.," or "LLC.")	
ARTICLE II - Address:		
The mailing address and street address of the p	oringinal office of the Limited Liability Com	ınany is:
. no maning address and shoot address of the p	Americal office of the Billinea Blacking Com	pully 13.
Principal Office Address:	Mailing Address:	
1112 Weston Road	1112 Weston Road	
Suite 165	Suite 165	
Weston, Fl 33326	Weston, FL 33326	
ARTICLE III - Registered Agent, Registered The Limited Liability Company cannot serve as its own Regist business entity with an active Florida registration.)  The name and the Florida street address of the	stered Agent. You must designate an individual or another	SECRETA DIVISION OF
	5	
Nancy Comparato	<del></del>	<b>모</b> 물을
Name		

1112 Weston Road, Suite 165

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

Weston, FL 33326
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)

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 Member	
Nancy Comparato,MGRM	1112 Weston Road
	Suite 165
	Weston, FL 33326
	<del></del>
·	
(Use attachment if necessary)	
	40.4.40
· · · · · · · · · · · · · · · · · · ·	e date of filing: 10-1-10 (OPTIONAL)
an effective date is listed, the date must be or 90 days after the date of filing.)	be specific and cannot be more than five business days prior
or 30 days after the date of lining.)	
	<u></u>
<b>REQUIRED SIGNATURE:</b>	SE VISE
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<b>—</b> 10	
Tancy	Comparate 3 35
7 MM Signature of a memb	er or an authorized representative of a member. 🔻 💆 💆
(In accordance with section 60	er or an authorized representative of a member.  8.408(3), Florida Statutes, the execution of this document
(In accordance with section 60 constitutes an affirmation unde	er or an authorized representative of a member.  8.408(3), Florida Statutes, the execution of this document er the penalties of perjury that the facts stated herein are true.
(In accordance with section 60 constitutes an affirmation unde I am aware that any false infor	er or an authorized representative of a member.  8.408(3), Florida Statutes, the execution of this document
(In accordance with section 60 constitutes an affirmation under I am aware that any false infor	8.408(3), Florida Statutes, the execution of this document or the penalties of perjury that the facts stated herein are true.

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)