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SECRETARY OF STATE
ALL AHASSEF, FLOBIO

J. BRYAN

DEC 13 2010

EXAMINER

COVER LETTER

Division of Corporations	
_{SUBJECT:} Pontoon Lagoon, L	LC
	Limited Liability Company
The enclosed Articles of Organization and fee(s	s) are submitted for filing.
Please return all correspondence concerning thi	s matter to the following:
David Rogers	
	Name of Person
	Firm/Company
1716 Duncan Street	
	Address
Key West, FL 33040	Address City/State and Zip Code
	City/State and Zip Code
rzima1965@aol.com E-mail address: (to be	used for future annual report notification)
For further information concerning this matter,	please call:
David Rogers	at (305) 923-2337
Name of Person	Area Code & Daytime Telephone Number
Enclosed is a check for the following amou	nt:
\$125.00 Filing Fee State Certificate of State	
Mailing Address Registration Section Division of Corporat P.O. Box 6327 Tallahassee, FL 3231	Clifton Building

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Compan	y is:	
Pontoon Lagoon, LLC		_
(Must end with the words "Limited	Liability Company, "L.L.C.," or "LLC.")	
ARTICLE II - Address:		
The mailing address and street address of the	he principal office of the Limited Liability	Company is:
Principal Office Address:	Mailing Address:	
1716 Duncan Street	1716 Duncan Street	
Key West, FL 33040	Key West, FL 33040	_
ARTICLE III - Registered Agent, Regist (The Limited Liability Company cannot serve as its own business entity with an active Florida registration.)	tered Office, & Registered Agent's Signa Registered Agent. You must designate an individual or	ature: another
The name and the Florida street address of	the registered agent are:	
David Rogers	5	語の二
	Name	强。
1716 Duncan	Street	ED MIN:55
Florida stre	et address (P.O. Box NOT acceptable)	70 =
Key West,	_{FL} 33040	雪5
Ci	ty, State, and Zip	200

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..

(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:

MGRM	Paul D. Scott P.O. Box 2577	
·	Key West, FL 33045	
MBR	David Rogers	
	1716 Duncan Street	
	Key West, FL 33040	
MBR	John Waterbury	1
	1716 Duncan Street	FR 6
	Key West, FL 33040	PAR PE
		DEC -
		S
		OF STAT
		TO:
(Use attachment if necessary)		TATE
(Ose attachment if necessary)		Dm A
LE V: Effective date, if other than th	ne date of filing	(OPTIONAI

REQUIRED SIGNATURE:

Signature of a member of 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. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)

Rogers

Typed or printed name of signe

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)