

L11 0000 60940

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP  WAIT  MAIL

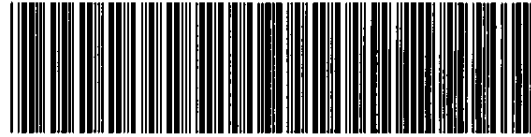
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



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400207922024  
05/23/11--01014--001 \*\*130.00

EFFECTIVE DATE 05-16-11

11 MAY 23 AM 11:30  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED

B. BOSTICK  
MAY 24 2011  
EXAMINER

**COVER LETTER**

**TO: Registration Section  
Division of Corporations**

**SUBJECT: Paddleboard Excursions, 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:

**Cynthia A. Rogers**  
Name of Person

**Paddleboard Excursions**  
Firm/Company

**1208 Marine Way, Unit G-9**  
Address

**North Palm Beach, FL 33408**  
City/State and Zip Code

**cindi@paddleboardexcursions.com**  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

**Cynthia A. Rogers** at ( **561** ) **718-3105**  
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

STATE OF FLORIDA  
TALLAHASSEE, FLORIDA

11 MAY 23 AM 11:30

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**ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY**

**ARTICLE I - Name:**

The name of the Limited Liability Company is:

**Paddleboard Excursions, 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 principal office of the Limited Liability Company is:

**Principal Office Address:**

**Mailing Address:**

Paddleboard Excursions  
1208 Marine Way, Unit G-9  
North Palm Beach, FL 33408

Paddleboard Excursions  
1208 Marine Way, Unit G-9  
North Palm Beach, FL 33408

**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.)

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

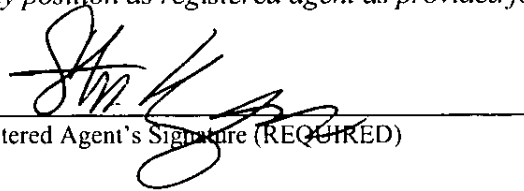
Steve Rogers  
Name

1208 Marine Way, Unit G-9  
Florida street address (P.O. Box **NOT** acceptable)

North Palm Beach FL 33408  
City, State, and Zip

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MAY 23 AM 11:30  
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CLERK  
TALLAHASSEE, FLORIDA

*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)

**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:**

MGR

Cynthia A. Rogers  
1208 Marine Way, Unit G-9  
North Palm Beach, FL 33408

MGRM

Richard Bradley  
11 Summer Place  
Rockledge, FL 32955

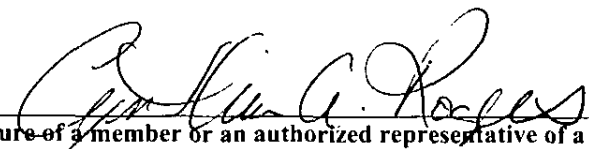
11 MAY 2011 11:30  
SOLICITOR OF STATE  
TALLAHASSEE, FLORIDA

FILED

(Use attachment if necessary)

**ARTICLE V:** Effective date, if other than the date of filing: May 16, 2011. (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. 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.)

Cynthia A. Rogers  
\_\_\_\_\_  
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)