## 1110000084555

| (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: |
| A. LUNT                                 |

JUL 22 2011

**EXAMINER** 

Office Use Only

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07/20/11--01013--008 \*\*125.00

SECRETARY OF STATE TALLAHASSEE, FLORIO/

班 20 附 211

## THOMAS F. KIESEL

ATTORNEY AT LAW

2121 McGregor Boulevard, Fort Myers, Florida 33901

THOMAS F. KIESEL

(239) 334-1800

REPLY To: POST OFFICE DRAWER 1000 FORT MYERS, FLORIDA 33902 FACSIMILE (239) 332-3927 tfkiesel@aol.com

July 18, 2011

Department of State Division of Corporations Corporate Filings P.O. Box 6327 Tallahassee, FL 32314

Re: Blue Lightning Powerboats, LLC

Dear Ladies and Gentlemen:

Enclosed please find the following:

- 1. Articles of Organization of Blue Lightning Powerboats, LLC, together with a duplicate copy.
- 2. Our client's check for payment in the amount of \$125.00 representing payment in full of the following:

| \$100.00 | Filing Fee for Articles of Organization |
|----------|---|
| \$ 25.00 | Designation of Registered Agent         |
| \$125.00 | TOTAL                                   |

Please file the enclosed and forward to the undersigned the filed copy of the Articles of Organization and letter of acknowledgment.

Thank you for your assistance and in the event that you have any questions or concerns, please do not hesitate to contact me.

Very truly yours,

Thomas F. Kiesel

TFK/sns Enclosure

## ARTICLES OF ORGANIZATION OF BLUE LIGHTNING POWERBOATS, LLC,

The undersigned person(s) pursuant to the provisions of the Floridac Limited Liability Company Act, hereby adopt the following Articles of Organization:

FIRST: The name of the Limited Liability Company shall be BLUE LIGHTNING POWERBOATS, LLC (hereinafter "Company").

**SECOND:** The period of its duration shall be perpetual.

**THIRD:** The mailing address and street address of the principal office is 2806 Valencia Way, Fort Myers, FL 33901.

**FOURTH:** The name and street address of the registered agent within the State of Florida is PETER SCHMID, 2806 Valencia Way, Fort Myers, FL 33901.

**FIFTH:** The Limited Liability Company is to be **member** managed.

**SIXTH:** The person or persons executing these Articles of Organization is a member or the authorized representative of a member of the Limited Liability Company.

PETER SCHMID

STATE OF FLORIDA COUNTY OF LEE

SWORN TO and subscribed before me this 15 4 day of July, 2011, by PETER SCHMID, who [X] is personally known to me or who [ ] has produced as identification and who did take an oath.

My commission expires:



Notary Public

## ACKNOWLEDGMENT OF REGISTERED AND RESIDENT AGENT

Having been named to accept service of process for the above-stated limited liability company, at the place designated in this certificate, I hereby agree to act in this capacity, and agree to comply with the provisions of said act relative to keeping open said office.

PETER SCHMID, Registered Agent

SEURETARY OF STATE

FILED