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EXAMINER AUG 2 9 2011

SUBJECT: Fin-Atic Fishing Charters, 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: James S. Kinne Name of Person Firm/Company 3400 N. Ocean Drive #1107 Address Singer Island, FL. 33404 City/State and Zip Code Jim@palmsouthco.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: James Kinne <sub>1</sub> 762-9116 Name of Person Area Code & Daytime Telephone Number Enclosed is a check for the following amount: \$125.00 Filing Fee **\(\varphi\)**\$130.00 Filing Fee & \$155.00 Filing Fee & \$160.00 Filing Fee, Certificate of Status Certified Copy Certificate of Status & (additional copy is enclosed) Certified Copy (additional copy is enclosed) Mailing Address Street/Courier Address Registration Section Registration Section Division of Corporations **Division of Corporations** P.O. Box 6327 **Clifton Building** Tallahassee, FL 32314 2661 Executive Center Circle Tallahassee, FL 32301

TO:

Registration Section
Division of Corporations

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:	
The name of the Limited Liability Company	y is:
Fin-Atic Fishing Charters, LLC (Must end with the words "Limited I	Liability Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the	ne principal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
3400 N. Ocean Drive #1107	Same
SINGER ISLAND, FL 33404	
	Registered Agent. You must designate an individual or another the registered agent are:
James S. Kinne	<u> </u>
N	ame S T
3400 N. Ocean Drive	#1107
	t address (P.O. Box NOT acceptable)
Singer Island	FL33404
City	y, State, and Zip
liability company at the place designated registered agent and agree to act in this cape statutes relating to the proper and complete	I to accept service of process for the above stated limited in this certificate, I hereby accept the appointment as acity. I further agree to comply with the provisions of all e performance of my duties, and I am familiar with and registered agent as provided for in Chapter 608, F.S
SAAM KI	! Lue _
Registered Agent's Si	gnature (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:

	Name and Address:
"MGR" = Manager "MGRM" = Managing Member	
	James S. Kinne
MGR	3400N. Ocean Drive #1107
	Singer Island, FL 33404
The state of the s	
	4-2-2-3
(Use attachment if necessary)	
CLE V: Effective date, if other than the	e date of filing: (OPTIONAl be specific and cannot be more than five business days
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\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)

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