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SECRETARY OF STATE
SECRETARY OF STATE

J. BRYAN

FEB 21 2012

EXAMINER

COVER LETTER

TO: **Registration Section Division of Corporations** Sarasota Custom Boatworks SUBJECT: 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: Clifford E. Jung Name of Person Sarasota Custom Boatworks Firm/Company 5515 15th Street East Unit E Address Bradenton, Florida 34203 City/State and Zip Code cliffjung@gmail.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Clifford Jung Name of Person Area Code & Daytime Telephone Number Enclosed is a check for the following amount: \$125.00 Filing Fee \(\nabla\) \$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

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

(additional copy is enclosed)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

Sarasota Custo	m Boatworks LLC.
(Must end with the words "Li	nited Liability Company, "L.L.C.," or "LLC.")
ARTICLE II - Address:	
The median address and stock address	of the principal office of the Limited Liability Company is
The maining address and street address	of the principal office of the Elimited Elability Company is
Principal Office Address:	Mailing Address:
C	

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

	Clifford Jung	SE	20
	Name	E.F.	2012 FEB
8	57 WeeBurn Street	AHA:	
	Florida street address (P.O. Box NOT acceptable)	SEX	20
Sarasota	_{FL} 34243	T. S.	PK
	City, State, and Zip	STA ALS	
		\simeq	CB

Having been named as registered agent and to accept service of process for the above stated imited 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 (REOUIRED)

(CONTINUED)

Page 1 of 2

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:
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(Use attachment if necessary)	<u> </u>
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LE V: Effective date, if other than the fective date is listed, the date must be days after the date of filing.) REQUIRED SIGNATURE: Signature of a member of a	e specific and cannot be more than five business of

Page 2 of 2

\$125.00 Filing Fee for Articles of Organization and Designation

of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)