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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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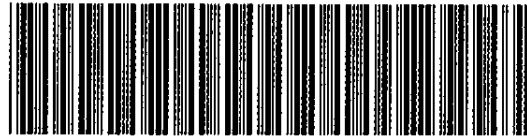
(Business Entity Name)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

B. BOSTICK

JUL 2 2012

EXAMINER

TRANSMITTAL LETTER

TO:

REGISTRATION SECTION
DIVISION OF CORPORATIONS
PO BOX 6327
TALLAHASSEE FL 32314

NAME OF LIMITED LIABILITY COMPANY
LEWIS BAIT AND TACKLE OF LEE COUNTY LLC

ENCLOSED ARTICLES OF ORGANIZATION AND FEE ARE SUBMITTED
FOR FILING FEE OF \$125.00

PLEASE RETURN ALL CORRESPONDANCE CONCERNING THIS MATTER
TO THE FOLLOWING

NAME
STEVEN COBB

FIRM
LEWIS BAIT AND TACKLE OF LEE COUNTY LLC

ADDRESS
5311 COBALT CT

CITY
CAPE CORAL FL 33904

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TALLAHASSEE, FLORIDA

ARTICLES OF ORGANIZATION

FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I-Name:

The name of the Limited Liability Company is:
LEWIS BAIT AND TACKLE OF LEE COUNTY LLC

ARTICLE II-Address:


The mailing address and street address of the principal office
of the Limited Liability Company is:
5311 COBALT CT
Cape Coral, FL 33904

ARTICLE III- Registered Agent, Registered Office, &
Registered Agent's Signature:

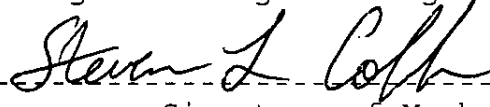
The name and the Florida street address of the registered
agent is:

STEVEN COBB
5311 COBALT CT
Cape Coral, FL 33904

Having been named 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



Signature of Member

(In accordance with section 608.403(3),
Florida Statutes, the execution of this
document constitutes an affirmation under the
penalties of perjury that the facts stated
herein are true.)

STEVEN COBB
Typed or printed name of signee

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