L12000089444

(Re	equestor's Name)	
(Ac	ldress)	
(Ac	ldress)	
(Cir	ty/State/Zip/Phone	. #h
	_	<u> </u>
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nam	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
	5 111 6 16	
Special Instructions to	Filing Officer:	

G. MCLEOD

JUL 1 0 2012

EXAMINER



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COVER LETTER

3	•	2			H.	
TO:	Registratio Division of	n Section Corporations	·.	; \$ t		4
SUBJE	cr. Bea	chside Boat Renta	ls, LLC			
			ed Liability Cor	npany		
The end	closed Article	es of Organization and fee(s) are	submitted for fi	ling.		
Please	return all com	respondence concerning this matt	ter to the follow	ing:		
	<u>Patrick</u>	Close	Name of Person			
			Name of Person			
	Beachs	side Boat Rentals, l			· · · · · · · · · · · · · · · · · · ·	
			Firm/Company			
	PO Box	¢ 542456				
			Address			
į	Merritt Is	land, 32931				
		Cit	y/State and Zip C	ode		
	patrickclo	se@earthlink.net				
-		E-mail address: (to be used i	or future annual	report notification	on)	
For fur	ther informati	ion concerning this matter, please	e call:			
Patri	ck Close		_ _{at (} 321	693-29		
	Na	me of Person	Area C	ode & Daytime	Telephone Number	
Enclos	sed is a checl	k for the following amount:				
 \$125.0 0	Filing Fee	\$130.00 Filing Fee & Certificate of Status	Certified	iling Fee & Copy copy is enclosed	\$160.00 Filin Certificate of Certified Cop (additional copy	Status &
		Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Regist Divisi Clifto 2661	t/Courier Additation Section for Corporate Building Executive Centers FL 3230	tions ter Circle	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

	oat Rentals, L	Liability Company, "L.L.C.," or "LLC.")	
(1774.34	t did will the words thinked	Endonly Company, 2.2.C., or 22C.	
ARTICLE II - Add			
The mailing address	and street address of t	he principal office of the Limited Li	ability Company is:
Principal Office Ad	<u>ldress:</u>	Mailing Address:	
2700 Harbortown Dri	ive	PO Box 542456	
Merritt Island, FL		Merritt Island, FL	
32952		32954	
	larida atraat addrasa af	the registered agent are:	A Sec. 7
	Patrick Close		1 CD
	Patrick Close	Name	1 CD
-	Patrick Close	Name	1 CD
-	Patrick Close 1 2700 Harborto	Name Own Drive ext address (P.O. Box NOT acceptable)	1 CD
- 2	Patrick Close 1 2700 Harborto	Name Own Drive	1 CD
- 2	Patrick Close 2700 Harborto Florida stre Merritt Island	Name Own Drive ext address (P.O. Box NOT acceptable)	JUL -9 PM CRETANY OF AHASSEE, F

(CONTINUED)

Registered Agent's Signature (REQUIRED)

ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

"MGR" = Manager "MGRM" = Managing Member	
MGR	Patrick Close
· · · · · · · · · · · · · · · · · · ·	PO Box 542456
	Merritt Island, FL 32954
	
	
•	
···	
(Use attachment if necessary)	
LE V: Effective date, if other than	n the date of filing: (OPTION
fective date is listed, the date mu	ust be specific and cannot be more than five business d
days after the date of filing.)	

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.)

Patrick Close

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)