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SEURETHRY OF STATE
ALL AHASSEE FLORID

B. BOSTICK

JUL 11 2012

EXAMINER

COVER LETTER

División of	Corporations					
SUBJECT:	Roberts	Boat LLC	2			
	Name of Limite	d Liability Com	pany	-		
The enclosed Article	es of Organization and fee(s) are s	ubmitted for fili	ng.			
Please return all corr	respondence concerning this matte	er to the following	ng:			
	Rober	t Mergen	thaler			
		Name of Person				
		Firm/Company				
		, .	Cuita C			
_	1001 חווו	Avenue,	Suite C			
	Mangoni	a Park, Fl,	33407			
		/State and Zip Coo				
		ndo@yahoo		,		
	E-mail address: (to be used fo	r future annual re	port notification)			-
For further informati	on concerning this matter, please			7 F 2	12 JI SECK	
Robert I	Mergenthaler	at (_561	, 584-0504	(2	12 JUL -9	
Na	me of Person	Area Coc	de & Daytime Tele	phone Number	7 \$ ****, 7**	7-1
Enclosed is a check	c for the following amount:			7 C	AM 6:	
\$125.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	\$155.00 Fili Certified Co (additional co		\$160.00 File Certificate of Certified Cop (additional copy	Status &	
	Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Registra Division Clifton 2661 Ex	Courier Address ation Section of Corporations Building executive Center Cossee, FL 32301	s		

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name	CLE I - Name	e:
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The name of the Limited Liability Company is:

Roberts Boat LLC

(Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:Mailing Address:1601 Hill Avenue, Suite C1601 Hill Avenue, Suite CMangonia Park, Fl, 33407Mangonia Park, Fl, 33407

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: (The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

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

Robert Mergenthaler	12 J
Name	
1601 Hill Avenue, Suite C	-9 -9
Florida street address (P.O. Box NOT acceptable)	mg 🕿 🖽
Mangonia Park _{FL} 33407	FLE ST
City, State, and Zip	15

Having been named as 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 (REQUIRED)

(CONTINUED)

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

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

MGR		Robert Mergenthaler
		1601 Hill Avenue, Suite C
		Mangonia Park FI 33407
		——————————————————————————————————————
		
		<u> </u>
,		
·		
(Use attachment	if necessary)	
	•	1.1.4.0040
		e date of filing: <u>July 1, 2012</u> . (OPTION) be specific and cannot be more than five business da
days after the day	ate of filing.)	be specific and cannot be more than five business da

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.)

> Robert Mergenthaler 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)