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B. BOSTICK

TQ:

Registration Section **Division of Corporations**

Haole Paddleboard, 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:

and retain an outrespondence contenting and matter to the rollowing.			
Brian M. Jenkins			
Name of Person			
Haole Paddleboard, LLC			
Firm/Company			
1606 Bryn Mawr Street			
Address			
Orlando, FL 32804			
City/State and Zip Code	A S	<u> </u>	
haolepaddleboardllc@gmail.com			
E-mail address: (to be used for future annual report notification)			-
r further information concerning this matter, please call:	SSER YRY	\sim	Ţ
Brian M. Jenkins 407 808-2645		PH 4:	Ţ
Name of Person Area Code & Daytime Telephone Number	RE	T.	

Enclosed is a check for the following amount:

□\$125.00 Filing Fee ■\$130.00 Filing Fee & Certificate of Status

□\$155.00 Filing Fee & Certified Copy (additional copy is enclosed) □ \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

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

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

Haole Paddlebos		nited Liability Company, "L.L.C.," or "LLC.")	
	(Must end with the words "Lim	nited Liability Company, "L.L.C.," or "LLC.)	
ARTICLE II	- Address:		
The mailing a	ddress and street address	of the principal office of the Limited Liability Co	ompany is:
Principal Off	îce Address:	Mailing Address:	
1606 Bryn Mawr	Street	1606 Bryn Mawr Street	
Orlando, FL		Orlando, FL	
32804		32804	
		gistered Office, & Registered Agent's Signatu own Registered Agent. You must designate an individual or ano	ther
business entity w	ility Company cannot serve as its of the an active Florida registration.)	own Registered Agent. You must designate an individual or ano	ther ム ム
business entity w	ility Company cannot serve as its of the an active Florida registration.) the Florida street address	own Registered Agent. You must designate an individual or ano	ther 13 JAN -2 Pi
business entity w	ility Company cannot serve as its of the an active Florida registration.) the Florida street address	own Registered Agent. You must designate an individual or ano AGE of the registered agent are:	ther 13 JAN -2 PH I
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business entity w	ility Company cannot serve as its of ith an active Florida registration.) the Florida street address Brian M. Jenkins 1606 Bryn Mawr Street Florida	own Registered Agent. You must designate an individual or and Section of the registered agent are: Name Name Street address (P.O. Box NOT acceptable) 32804	ther 13 JAN -2 PH I

(CONTINUED)

Registered Agent's Signature (REQUIRED)

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:

MGR	Brian M. Jenkins	
· · · · · · · · · · · · · · · · · · ·	1606 Bryn Mawr Street	
	Orlando, FL 32804	
		
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(Use attachment if necessary)		
LE V: Effective date, if other than the	e date of filing: January 1, 2013	TATE 9 (OPTION
fective date is listed, the date mus		

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.)

Brian M. Jenkins

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)