

Florida Department of State  
Division of Corporations  
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To:  
Division of Corporations  
Fax Number : (850) 617-6383

From: Carrie Ramos, Paralegal, please fax confirmation to 407 244-5690  
Account Name : GRAYROBINSON, P.A. - ORLANDO  
Account Number : I20010000076  
Phone : (407) 843-8880  
Fax Number : (407) 244-5690

**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\***

Email Address: \_\_\_\_\_

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**FLORIDA LIMITED LIABILITY CO.  
Beach and Boarding, LLC**

|                       |          |
|-----------------------|----------|
| Certificate of Status | 0        |
| Certified Copy        | 0        |
| Page Count            | 02       |
| Estimated Charge      | \$125.00 |

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**ARTICLES OF ORGANIZATION  
FOR FLORIDA LIMITED LIABILITY COMPANY**

**ARTICLE I - Name:**

The name of the Limited Liability Company is:

BEACH AND BOARDING, LLC

**ARTICLE II - Address:**

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

Mailing Address

P.O. BOX 13100

INDIALANTIC, FL 32903

Principal Office Address

503 PEREGRINE DRIVE

INDIALANTIC, FL 32903

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

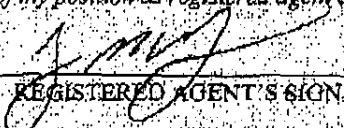
The name and the Florida street address of the registered agent are:

G. MITCHELL VARNES

503 PEREGRINE DRIVE

INDIALANTIC, FL 32903

*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

**Article IV - Manager(s) or Managing Member(s):**

The Limited Liability Company is to be managed by its members and is, therefore, a "member-managed" limited liability company. The name and address of each initial managing member is as follows:

Title:

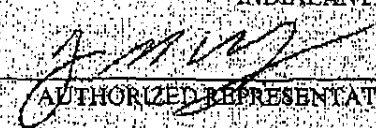
MGRM

Name and Address:

G. MITCHELL VARNES

503 PEREGRINE DRIVE

INDIALANTIC, FL 32903

  
AUTHORIZED REPRESENTATIVE'S SIGNATURE

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.

G. MITCHELL VARNES

Typed or printed name of signer

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)

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