L13000025595

(Re	equestor's Name)	
(Ad	ldress)	· · ·
(Ad	ldress)	
. (Ci	ty/State/Zip/Phone	e #)
	☐ WAIT	MAIL
(Bu	usiness Entity Nar	me)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



100244582411

SECRETARY OF STATE ALLAHASSEE, FLORIDA FILED 2013 FEB 18 ANIO: 21

COVER LETTER

TO: Registration So Division of Cor			
SUBJECT: Starbo	oard Florida XI,	LLC	•
		ed Liability Company	
The enclosed Articles of	Organization and fee(s) are	submitted for filing.	
	ondence concerning this matt	-	
K Day Bi	pkatoff	-	
<u>K. Ray Pi</u>	rikstali	Name of Person	<u> </u>
V Pay Pi	nkataff BC		
N. May FI	nkstaff, PC	Firm/Company	
DO D 0	4.400	·	
PO Box 3	1408	Address	
		Addiess	
Knoxville, T	N 37930		
~		y/State and Zip Code	
ray@pinksta		or future annual report notification)	
For further information of	concerning this matter, pleaso		
Ray Pinkstaff		at (865) 690-7010	
	of Person	Area Code & Daytime Telep	hone Number
Enclosed is a check for	r 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 C Tallahassee, FL 32301	ircle

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Starboard Florida XI, 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:
27 Star Island Drive	PO Box 31408
Miami Beach, FL 33139	Knoxville, TN 37930

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:

Peter Yanowitch

Name
2903 Salzedo Street

Florida street address (P.O. Box NOT acceptable)

Coral Gables

FL 33134

City, State, and Zip

.

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' Signature (REQUIRED)

(CONTINUED)

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" = Manager "MGRM" = Managing Member	Name and Address:
MGR	John M. Jansheski 27 Star Island Drive
1405	Miami Beach, FL 33139
MGR	Kevin McCready
	118 N. Peters Rd. #132 Knoxville, TN 37923
•	
(Use attachment if necessary)	
tuse anachment it necessary)	
(coo amadimidin ii necessary)	
CLE V: Effective date, if other than th	e date of filing: (OPTIONAL)
CLE V: Effective date, if other than th	e date of filing: (OPTIONAL) be specific and cannot be more than five business days prior
CLE V: Effective date, if other than the effective date is listed, the date must left.	
CLE V: Effective date, if other than the effective date is listed, the date must left.	be specific and cannot be more than five business days prior
CLE V: Effective date, if other than the effective date is listed, the date must loo days after the date of filing.)	be specific and cannot be more than five business days prior
CLE V: Effective date, if other than the effective date is listed, the date must be days after the date of filing.) REQUIRED SIGNATURE:	be specific and cannot be more than five business days prior
CLE V: Effective date, if other than the effective date is listed, the date must be days after the date of filing.) REQUIRED SIGNATURE:	be specific and cannot be more than five business days prior SECRETARY SECRETARY
CLE V: Effective date, if other than the effective date is listed, the date must be days after the date of filing.) REQUIRED SIGNATURE: Signature of a manual (In accordance with section 60)	be specific and cannot be more than five business days prior

John M. Jansheski

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)