

08/01/2031 04:49

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7829 001/004

Florida Department of State  
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**FLORIDA LIMITED LIABILITY CO.  
MASTERSON YACHT RENTALS, L.L.C.**

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September 19, 2013

FLORIDA DEPARTMENT OF STATE  
Division of Corporations

LAZARUS

SUBJECT: MASTERSON YACHT, RENTALS, L.L.C.  
REF: W13000051976

We have received your document for MASTERSON YACHT, RENTALS, L.L.C. and your check(s) totaling \$. However, the enclosed document has not been filed and is being returned for the following correction(s):

Verify the name and punctuation marks. Did you want a (,) after the word yacht? Also correct the spelling of the Managers last name.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Neyssa Culligan  
Regulatory Specialist II

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**ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY****ARTICLE I - Name:**

The name of the Limited Liability Company is:

MASTERSON YACHT RENTALS, L.L.C.

(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:**1111 CRANDON BLVD B 1104  
KEY BISCAYNE, FL. 33149**Mailing Address:**1111 CRANDON BLVD B 1104  
KEY BISCAYNE, FL. 33149**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:

ALAN B MASTERSON

Name

1111 CRANDON BLVD # B1104Florida street address (P.O. Box NOT acceptable)KEY BISCAYNE FL 33149

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's Signature (REQUIRED)

(CONTINUED)

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

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

**Title:**

"MGR" = Manager

"MGRM" = Managing Member

**Name and Address:**MGRALAN B MASTERSON1111 CRANDON BLVD UNIT B 1104KEY BISCAYNE, FL. 33149

(Use attachment if necessary)

**ARTICLE V:** Effective date, if other than the date of filing: \_\_\_\_\_ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

**REQUIRED SIGNATURE:**

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.)

ALAN B MASTERSON

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)

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