

L13000144504

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

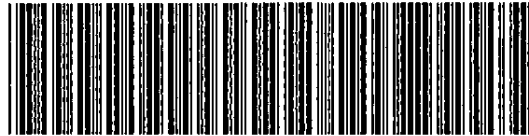
(Business Entity Name)

(Document Number)

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13 OCT 11 AM 10:12
TALLAHASSEE, FLORIDA

J. Shivers OCT 14 2013

10105-6121



FLORIDA DEPARTMENT OF STATE
Division of Corporations

September 25, 2013

DEBRA SMITH
527A REVILO BLVD
DAYTONA BEACH, FL 32118

SUBJECT: DAYTONA CRUISES, LLC
Ref. Number: W13000050109

We have received your document for DAYTONA CRUISES, LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You failed to make the correction(s) requested in our previous letter.

Please list the complete principal office address.

Please return the corrected original and one copy of 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.

Justin M Shivers
Regulatory Specialist II
Registration/Qualification Section

Letter Number: 813A00021329

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

DAYTONA CRUISES, 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:

Debra A. Smith
527A Revilo Blvd
DAYTONA BEACH, FL
32118

Mailing Address:

527A Revilo Blvd, DAYTONA Bch
HALIFAX HARBOR FL 32118
66 SLIP NORTH
450 BASIN ST. DAYTONA BEACH, FL

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:

Debra A Smith / G-IPSY MOON
Name
527A Revilo Blvd
Florida street address (P.O. Box **NOT** acceptable)
DAYTONA BEACH FL 32118
City, State, and Zip
HALIFAX HARBOR
66 SLIP NORTH
450 BASIN ST
DAYTONA BEACH, FL
32118

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.

Debra A. Smith

Registered Agent's Signature (REQUIRED)

(CONTINUED)

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STATE OF FLORIDA
HALL COUNTY CLERK

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:

MGRM

Debra A Smith
527A Revilo Blvd
DAYTONA BEACH, FL

MGRM

GARTH GREEN / BOAT GYPSY MOON
HALIFAX HARBOR, B6 Slip
DAYTONA BEACH, FL

450 BASIN ST.
B6 Slip NORTH
DAYTONA BEACH, FL 32114

(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:

Debra A. Smith

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.)

Debra A. Smith

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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STATE OF FLORIDA