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(Re	questor's Name)	
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PICK-UP	☐ WAIT	MAIL
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Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

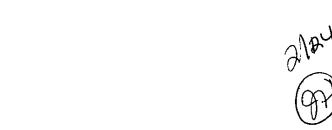
Office Use Only



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02/06/14--01014--009 **125.00

SECRETARY OF STATE SECRETARY OF STATE OF COMPORATIONS



COVER LETTER

TO:	Registration Division of C	Section Corporations		
SUBJI	ECT: <u>rag'e</u> i	M.EISHING.CHARTERS Name of Lir	nited Liability Company	
The en	closed Articles	of Organization and fee(s) as	re submitted for filing.	
Please	return all corre	spondence concerning this m	atter to the following:	
	Brian Ale	exander Goldman	Name of Person	
	BAG'EM	FISHING CHARTERS	Firm/Company	
	_2116 Sto	one Abbey Blvd	Address	14 FI
	Orlando,	FI 32828	City/State and Zip Code	FEB -6
_Bı	rian goldman@	Thive com	d for future annual report notifica	14 FEB -6 PH 2: 49
For fur	ther informatio	n concerning this matter, plea	ase call:	•
Brian	Goldman Nan	at (at (407) 977-7650 Area Code Daytime Te	lephone Number
Enclos	ed is a check fo	or the following amount:		
☑ \$125.0	0 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)
		iling Address istration Section	Street/Courier Add Registration Section	ress
	Divi	ision of Corporations	Division of Corporat	tions
		. Box 6327 ahassee, FL 32314	Clifton Building 2661 Executive Cen	ter Circle
	: 411	unussee, 1 L 32314	ZOOT EXCURITY CON	tor Circle

Tallahassee, FL 32301



February 11, 2014

BRIAN ALEXANDER GOLDMAN 2116 STONE ABBEY BLVD ORLANDO, FL 32828

SUBJECT: BAG'EM FISHING CHARTERS

Ref. Number: W1400008688

We have received your document for BAG'EM FISHING CHARTERS and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of a limited liability company must contain the words "Limited Liability Company," the abbreviation "L.L.C.," or the designation "LLC." The following suffixes are no longer acceptable: "Limited Company," "L.C.," and "LC." The abbreviations "Ltd." and "Co.", also are no longer acceptable. Please amend your document accordingly.

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) 245-6951.

JENNA D HARRIS Regulatory Specialist II

Letter Number: 714A00003022

SECRETARY OF STATE DIVISION OF CORPORATIONS

14 FFB -6 PM 2: 49

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:					
BAG'EM FISHING CHARTERS 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 prin	ncipal office of the Limited Liability Company is:				
Principal Office Address:	Mailing Address:				
2116 Stone Abbey Blvd Orlando, Fl 32828	2116 Stone Abbey Blvd. Orlando, Fl 32828				
another business entity with an active Florida reg The name and the Florida street address of the reg	its own Registered Agent. You must designate an individual or gistration.)				
Kyle Fletcher	Name				
3743 Savannah Loop					
Florida street address (P.	O. Box NOT acceptable)				
<u>Oviedo</u> City	FL_32765Zip				
the place designated in this certificate, I hereb capacity. I further agree to comply with the proof my duties, and I am familiar with and accept	ccept service of process for the above stated limited liability company at a ccept the appointment as registered agent and agree to act in this visions of all statutes relating to the proper and complete performance at the obligations of my position as registered agent as provided for in Chapter 605, F.S				

(CONTINUED)

Page 1 of 2

SECRETARY OF STATE DIVISION OF CORPORATIONS

<u>Title:</u>	Name and Address:
"AMBR" = Authorized Member	
"MGR" = Manager	
MGR	Brian Goldman
	2116 Stone Abbey Blvd
	Orlando, Fl 32828
AST. MGR	Christinė Goldman
	2116 Stone Abbey Blvd
	Orlando, Fl 32828

(Use attachment if necessary)	
•	
,	of filing: (OPTIONAL)
LE V: Effective date, if other than the date	e of filing: (OPTIONAL) secific and cannot be more than five business days prior to or 90 day
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LE V: Effective date, if other than the date ffective date is listed, the date must be spe of filing.) LE VI: Other provisions, if any. REQUIRED SIGNATURE:	ecific and cannot be more than five business days prior to or 90 day
CLE V: Effective date, if other than the date ffective date is listed, the date must be spe of filing.) CLE VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a me (In accordance with section 66)	ember or an authorized representative of a member. 05.0203 (1) (b), Florida Statutes, the execution of this document
CLE V: Effective date, if other than the date ffective date is listed, the date must be spe of filing.) CLE VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a me (In accordance with section 60 constitutes an affirmation under the constitutes an affirmation under the constitutes are section for the constitutes are affirmation under the constitutes are affi	ember or an authorized representative of a member.

ARTICLE IV-

Page 2 of 2

 $\frac{Filing\ Fees:}{\text{S125.00 Filing Fee}\ for\ Articles\ of\ Organization\ and\ Designation\ of\ Registered\ Agent}$

Typed or printed name of signee

Brian Goldman

\$ 30.00 Certified Copy (Optional)\$ 5.00 Certificate of Status (Optional)