

10-2-14  
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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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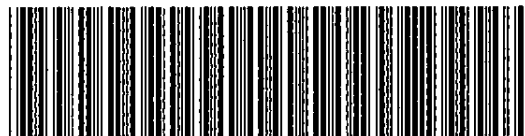
(Business Entity Name)

(Document Number)

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14 APR -8 AM 8:25  
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J. Shivers APR 09 2014

CORPDIRECT AGENTS, INC. (formerly CCRS)  
515 EAST PARK AVENUE  
TALLAHASSEE, FL 32301  
222-1173

**FILING COVER SHEET**  
**ACCT. #FCA-23**

**CONTACT:** KATIE WONSCH

**DATE:** 04/08/2014

**REF. #:** 9108171

**CORP. NAME:** BAHIA RCI LLC

- |  |   |   |
|--|---|---|
| <input type="checkbox"/> ARTICLES OF INCORPORATION   | <input type="checkbox"/> ARTICLES OF AMENDMENT  | <input type="checkbox"/> ARTICLES OF DISSOLUTION      |
| <input type="checkbox"/> ANNUAL REPORT               | <input type="checkbox"/> TRADEMARK/SERVICE MARK | <input type="checkbox"/> FICTITIOUS NAME              |
| <input type="checkbox"/> FOREIGN QUALIFICATION       | <input type="checkbox"/> LIMITED PARTNERSHIP    | <input checked="" type="checkbox"/> LIMITED LIABILITY |
| <input type="checkbox"/> REINSTATEMENT               | <input type="checkbox"/> MERGER                 | <input type="checkbox"/> WITHDRAWAL                   |
| <input type="checkbox"/> CERTIFICATE OF CANCELLATION |   |   |
| <input type="checkbox"/> OTHER:                      |   |   |

**STATE FEES PREPAID WITH CHECK# 70018221 FOR \$ 125.00**

**AUTHORIZATION FOR ACCOUNT IF TO BE DEBITED:**

\_\_\_\_\_ **COST LIMIT: \$** \_\_\_\_\_

**PLEASE RETURN:**

- |  |   |  |
|--|---|--|
| <input type="checkbox"/> CERTIFIED COPY        | <input type="checkbox"/> CERTIFICATE OF GOOD STANDING | <input checked="" type="checkbox"/> PLAIN STAMPED COPY |
| <input type="checkbox"/> CERTIFICATE OF STATUS |   |  |

Examiner's Initials

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**ARTICLES OF ORGANIZATION  
OF  
BAHIA RCI LLC**

The undersigned, being authorized to execute and file these Articles of Organization of BAHIA RCI LLC (the "Limited Liability Company"), hereby certifies that:

ARTICLE I — Name:

The name of the Limited Liability Company is:

Bahia RCI LLC

ARTICLE II — Address:

The mailing address and the street address of the principal office of the Limited Liability Company is 300 Alton Road, Suite 303, Miami Beach, Florida 33139.

ARTICLE III — Duration:

The period of duration for the Limited Liability Company shall be perpetual.

ARTICLE IV — Registered Agent:

The name and address of the registered agent for service of process in the state shall be:


RCI Marine, Inc.  
300 Alton Road  
Suite 303  
Miami Beach, Florida 33139

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ARTICLE V — Authorization to Manage:

The Limited Liability Company will be a member-managed company. The name and address of each person authorized to manage and control the Limited Liability Company is:

<u>Title</u>	<u>Name and Address</u>
Robert W. Christoph	300 Alton Road Suite 303 Miami Beach, Florida 33139
Robert W. Christoph, Jr	300 Alton Road Suite 303 Miami Beach, Florida 33139


  
Robert W. Christoph, Jr., *Member*

**STATEMENT ACCEPTING APPOINTMENT AS REGISTERED AGENT**

**BAHIA RCI LLC**

*Having been named as registered agent and to accept service of process for the above-stated limited liability company at the place designated by 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 the obligations of my position as a registered agent as provided for in Chapter 605, F.S.*

RCI Marine, Inc.

By:   
Name: Robert W. Christoph, Jr.  
Title: Vice President

Dated: April 8, 2014

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