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(Requestor's Name)

(Address)

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(City/State/Zip/Phone #)

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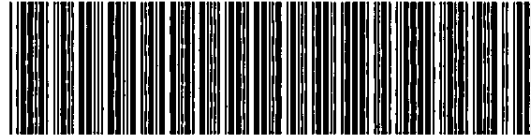
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

J. Shivers OCT 28 2014

**PAUL RYAN
ATTORNEY AT LAW P.A.**

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TEL. (941) 655-8970

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October 23, 2014

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

RE: Century Boats of Southwest Florida, LLC

Dear Sir or Madam:

Enclosed please find a Cover Letter, Articles of Incorporation, and our check in the amount of \$130, representing your filing fee.

Please file same and return a Certificate of Status to our office at your earliest convenience.

Thank you for your assistance in this regard.

Very Truly Yours,



Paul A. Ryan

PAR:mjd

Enclosures: Cover Letter
Articles of Incorporation
Check for \$130

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Century Boats of Southwest Florida, LLC
Name of Limited Liability Company

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Charles H. Shippey
Name of Person

Century Boats of Southwest Florida, LLC
Firm/Company

25096 Marion Avenue
Address

Punta Gorda, FL 33950
City/State and Zip Code

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Charles Shippey at (941) 592-6244
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for 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 Circle
Tallahassee, FL 32301

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SECTION OF STAFF
TALLAHASSEE, FLORIDA

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Century Boats of Southwest Florida, 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:

25096 Marion Avenue
Punta Gorda, FL 33950

Mailing Address:

25096 Marion Avenue
Punta Gorda, FL 33950

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:

Charles H. Shippey

Name

25096 Marion Avenue

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

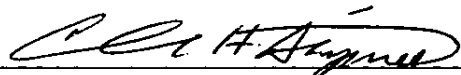
Punta Gorda

City

FL 33950

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 605, F.S..



Registered Agent's Signature (REQUIRED)

(CONTINUED)

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TALLAHASSEE, FLORIDA

ARTICLE IV-

The name and address of each person authorized to manage and control the Limited Liability Company:

Title:

"AMBR" = Authorized Member

"MGR" = Manager

MGR

Name and Address:

Charles H. Shippey

25096 Marion Avenue

Punta Gorda, FL 33950

AMBR

Shelli Massey

25096 Marion Avenue

Punta Gorda, FL 33950

AMBR

Timothy J. Harvey

25096 Marion Avenue

Punta Gorda, FL 33950

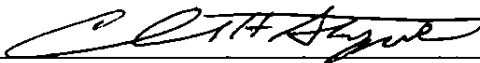
(Use attachment if necessary)

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.)

ARTICLE VI: Other provisions, if any.

REQUIRED SIGNATURE:



Signature of a member or an authorized representative of a member.

(In accordance with section 605.0203 (1) (b), 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.)

Charles H. Shippey

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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