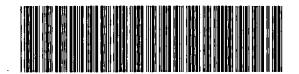
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## **COVER LETTER**

	Registration Section Division of Corporations
SUBJECT	T: Floatoa BAY BOATS LLC  Name of Limited Liability Company
The enclos	sed Articles of Organization and fee(s) are submitted for filing.
Please retu	urn all correspondence concerning this matter to the following:
	TERRY L. THOMAS  Name of Person
	Martie of Letzoni
	Firm/Company
	17649 S.E. FED. HWY.
	Address
	TEGINESTA FloRDIA 33469 City/State and Zip Code
_3	TEGUESTA FORDA 33469 City/State and Zip Code  E-mail address: (to be used for future annual report notification)
For further	r information concerning this matter, please call:
JEA	Name of Person Area Code Daytime Telephone Number
Enclosed i	is a check for the following amount:  Filing Fee U\$130.00 Filing Fee & Certificate of Status  Certificate of Status  Certified Copy (additional copy is enclosed)  Certified Copy (additional copy is enclosed)

# Mailing Address

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

# Street/Courier Address

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:	II PH	LED
Floatoa BAY BOATS LLC  (Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")	ELORIEA FLORIEA	•

**ARTICLE II - Address:** 

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:	<u>Mailing Address:</u>		
17649 S.E. FED HWY	17649 S.E. FED. HWY.		
TEQUESTA, FI. 33469	TEQUESTA, F1. 33469		

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:

Name

17149 S.E. FED. Hwy.

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

TEGUESTA FL 33469

City 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)

Page 1 of 2

	The name and address of each person authorize	zed to manage and control the Limited Liability (	Company:		
	<u>Title:</u> "AMBR" = Authorized Member "MGR" = Manager	Name and Address: Kerry Stewart			
	AMBR	19939 SeaBrook	R).		
	M:6 R	TERRY L. THOMAS 17649 S.E. FEO. HW TEQUESTA, Fl. 3346	7. 9		
	(Use attachment if necessary)				
(If an o	CLE V: Effective date, if other than the date of file offective date is listed, the date must be specific e of filing.)  CLE VI: Other provisions, if any.	ing: MBACH 6 H 20/5 (OPTIO and cannot be more than five business days pr		) days	aftei
					- - -
	REQUIRED SIGNATURE:				
	(In accordance with section 605.020 constitutes an affirmation under the am aware that any false information constitutes a third degree felony as	or or an authorized representative of a member of (1) (b), Florida Statutes, the execution of this openalties of perjury that the facts stated herein as on submitted in a document to the Department of provided for in s.817.155, F.S.)	document re true.		
		L. THOMAS ped or printed name of signee	-		
	\$125.00 Filing Fee for Articles of Organiz	Filing Fees: cation and Designation of Registered Agent	SEC	141	
	\$ 30.00 Certified Copy (Optional)		全部	E	77
	\$ 5.00 Certificate of Status (Optional)		المتركزي		*****

ARTICLE IV-

Page 2 of 2

DEC II PH 12: 0