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SECRETARY OF STATE
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ORIDA

MAY 01 2015 S. YOUNG

COVER LETTER

TO:	Registration Section Division of Corporations		
SUBJI	ECT: Wet Life Outoor Sports Name of Li	imited Liability Company	
The en	closed Articles of Organization and fee(s) a	are submitted for filing.	
Please	return all correspondence concerning this r	matter to the following:	
	Anthony L. Decker	Name of Person	
	Wet Life Outdoor Sports	Firm/Company	
	240 West End Drive # 713	Address	
	Punta Gorda, FL 33950		
		City/State and Zip Code	
_de	ecker_tony@yahoo.com E-mail address: (to be use	ed for future annual report notification)	
For fur	ther information concerning this matter, ple	mo %X ₹	
Antho		918) 576-8069	
	Name of Person	Area Code Daytime Telephone Number	
Enclos	ed is a check for the following amount:		
□ \$ 125.0	10 Filing Fee \$\times 130.00 Filing Fee & Certificate of Status	☐\$155.00 Filing Fee & ☐\$160.00 Filing Fee, Certified Copy (additional copy is enclosed) ☐\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)	ed)
	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	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:		
Wet Life Outdoor Sports L.L.C. (Must end with the words "Limi	ited Liability Company, "L.L.C.," or "	LLC.")
ARTICLE II - Address: The mailing address and street address of the principal	al office of the Limited Liability Comp	pany is:
Principal Office Address:	Mailing Address:	
240 West End Drive # 713 Punta Gorda, FL 33950	240 West End Drive # 713 Punta Gorda, FL 33950	
ARTICLE III - Registered Agent, Registered Office (The Limited Liability Company cannot serve as its of another business entity with an active Florida register.) The name and the Florida street address of the register.	wn Registered Agent. You must designation.)	
Anthony L. Decker	ver agent and	
	ime	
240 West End Drive # 713 Florida street address (P.O. I		
Punta Gorda	FL 33950	
City Having been named as registered agent and to accept the place designated in this certificate, I hereby acceptive. I further agree to comply with the provision of my duties, and I am familiar with and accept the Charles Registered Agent's Signature.	cept the appointment as registered age ons of all statutes relating to the proper obligations of my position as registere mapter 605/F.S	ent and agree to act in this r and complete performance
(CONTI) Page 1	•	FILED 15 APR 24 PM SECRETARY OF STALLAHASSEE, FI

AMBR" = Authorized Member MGR" = Manager AMBR Use attachment if necessary) EV: Effective date, if other than the date of filing: etive date is listed, the date must be specific and filing.) EVI: Other provisions, if any.	Anthony Decker 240 West End Drive # 713 Punta Gorda, FL 33950 cannot be more than five business	(OPTIONAL)
Use attachment if necessary) EV: Effective date, if other than the date of filing: ctive date is listed, the date must be specific and filing.)	240 West End Drive # 713 Punta Gorda, FL 33950	(OPTIONAL)
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REQUIRED SIGNATURE (Mthony)	l.Decker	
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 pen-	alties of perjury that the facts stated l	herein are true.
I am aware that any false information su		ment of State
constitutes a third degree felony as prov	ided for in s.s. (7.155, F.S.)	
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ARTICLE IV-