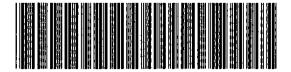
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(Re	equestor's Name)	
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Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	





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COVER LETTER

то:	Registration Section Division of Corporations		
SUBJI	ECT: <u>Biscayne Bay Adventure LLC</u> Name of Li	imited Liability Company	
	closed Articles of Organization and fee(s) a	_	
Please	return all correspondence concerning this r	matter to the following:	
	<u>Juan Santana</u>	Name of Person	
	Biscayne Bay Adventure LLC	Firm/Company	
	7550 SW 141 Street	Address	
	Palmettto, Bay , Fl 33158	City/State and Zip Code	<u>.</u>
<u>ma</u>	anacas@yahoo.com E-mail address: (to be use	ed for future annual report notifica	ition)
For fur	ther information concerning this matter, ple	ease call:	
	Name of Person	305) 968-5711 Area Code Daytime Tel	ephone Number
	ed is a check for the following amount: 0 Filing Fee \$\sum \frac{1}{3}130.00\$ Filing Fee & Certificate of Status	□\$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	S160.00 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 Adda Registration Section Division of Corporat Clifton Building 2661 Executive Cent Tallahassee, FL 3230	ions er Circle

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:	
Biscayne Bay Adventure LLC	
(Must end with the words "Limited L	iability Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the principal offi	ce of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
7550 SW 141 st. Palmetto Bay , Fl 33158	7550 SW 141 st. Palmetto Bay, FI 33158
ARTICLE III - Registered Agent, Registered Office, & (The Limited Liability Company cannot serve as its own Reanother business entity with an active Florida registration.) The name and the Florida street address of the registered ag	egistered Agent. You must designate an individual or)
Juan Santana Name	·
7550 SW 141 Street Florida street address (P.O. Box N	IOT acceptable)
Palmetto Bay	FL 33158
City	Zip
the place designated in this certificate, I hereby accept the capacity. I further agree to comply with the provisions of of my duties, and I am familiar with and accept the oblig	ice of process for the above stated limited liability company at the appointment as registered agent and agree to act in this all statutes relating to the proper and complete performance ations of my position as registered agent as provided for in 605, F.S
(CONTINUE)	0)

Page 1 of 2



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

	<u>Title:</u>	Name and Address:
	"AMBR" = Authorized Member	
	"MGR" = Manager	
	AMBR	Erik Santana
		7550 sw 141 street
		Palmetto Bay, Fl 33158
	AMBR	Adam Santana
	7 (110)	7550 SW 141 street
		Palmetto Bay , Fl 33158
		Tamietto Day , 1133130
	(Use attachment if necessary)	
		ate of filing: 4/30/15 (OPTIONAL)
	effective date is listed, the date must be : te of filing.)	specific and cannot be more than five business days prior to or 90 days afte
ARTI(CLE VI: Other provisions, if any.	
	REQUIRED SIGNATURE:	n MAHTTER
	Simple	
	/ Signature of a fi	nember or an authorized representative of a member.

/ 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.)

Juan Santana, Erik Santana, Adam Santana
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)