L/5000126926

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	= #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
•	•	,
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
•		
Special Instructions to	Filing Officer:	
	· <u></u>	

Office Use Only



600275226266

07/23/15--01010--011 **125.00

SECRETARY OF COMPONENT OR

EFFECTIVE DATE 07/25/13

207/28/15

COVER LETTER

	gistration Section vision of Corporations	
SUBJECT:	FINNATIC FISHING CHARTE	R LLC
SOBJECT.		Limited Liability Company
The enclose	d Articles of Organization and fee(s) are submitted for filing.
Please return	n all correspondence concerning thi	s matter to the following:
	THOMAS SWEENY	
-		Name of Person
	FINNATIC FISHING CHARTER	LLC
•		Firm/Company
	741 20TH ST SE	
		Address
	NAPLES FL 34117	
-	INNATICFISHINGCHARTER@	City/State and Zip Code
		used for future annual report notification)
For further in	formation concerning this matter, p	•
1	ΓΗΟMAS SWEENY	239 682-2461
-	Name of Person	Area Code Daytime Telephone Number
Enclosed is	a check for the following amount:	
\$125.00 Fili	ing Fee \$130.00 Filing Fee & Certificate of Status	
	Mailing Address New Filing Section	Street Address New Filing Section
	Division of Corporations	Division of Corporations
	P.O. Box 6327 Tallahassee, FL 32314	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:	
FINNATIC FISHING CHARTER LLC.	
	ility Company #I I C ? or #I I C ?)
(Must end with the words "Limited Liab	offing Company, "L.E.C.," of "LLC.")
ARTICLE II - Address:	
The mailing address and street address of the principal office	of the Limited Liability Company is:
the manning address and street address of the principal office	of the Entitled Elability Company is.
Principal Office Address:	Mailing Address:
741 20TH ST SE	741 20TH ST SE
NAPLES , FL 34117	NAPLES FL 34117
INAI LES, I E STITT	MAT LES PL 34TT7
ARTICLE III - Registered Agent, Registered Office, & Re The Limited Liability Company cannot serve as its own Regi nother business entity with an active Florida registration.)	
The name and the Florida street address of the registered ager	nt are:
THOMAS SWEENY	
Nar	me
741 20TH ST SE	

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..

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

NAPLES

City

Registered Agent's Signature (REQUIRED)

FLORIDA

State

34117

Zip

(CONTINUED)

Page 1 of 2

15 III 23 PH 1:08

Title:		Name and Address:
$\overline{\text{"AMBR"}} = I$	Authorized Member	
"MGR" = M	anager	
MGR		THOMAS SWEENY
	······································	741 20TH ST SE
		NAPLES FL 34117
'		
		
		· · · · · · · · · · · · · · · · · · ·
<i>(</i> 1.1 1	. • •	
(Use attachm	nent if necessary)	
LE V: Effective date is	ve date, if other than the date	of filing: JULY 25TH 2015 (OPTIONAL) ecific and cannot be more than five business days prior to or 90 days a
LE V: Effective date is cof filing.)	ve date, if other than the date listed, the date must be spe	ecific and cannot be more than five business days prior to or 90 days a
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THOMAS SWEENY

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)

monte of Status (Optional)