

L15000196191

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H15000280190 3)))



H150002801903ABC-

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To: Division of Corporations
Fax Number : (850)617-6381

From: Account Name : HARPER, KYNES, GELLER, GREENLEAF & FRAYMAN,P.A.
Account Number : 070651000745
Phone : (727)799-4840
Fax Number : (727)797-8206

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: Michael.sovie@hotmail.com

RECEIVED
15 NOV 24 PM 4:16
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FLORIDA LIMITED LIABILITY CO.
FISHRX Ventures, LLC

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$125.00

2015 NOV 24 AM 9:49
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
FILED

H15000280190 3

2015 NOV 24 AM 9:49
FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLES OF ORGANIZATION
OF
FISHRX VENTURES, LLC

The undersigned authorized representative does hereby subscribe to, acknowledge, and file the following Articles of Organization for the purpose of creating a limited liability company (the "Limited Liability Company") under the laws of the State of Florida.

ARTICLE I
Name

The name of the Limited Liability Company shall be FISHRX VENTURES, LLC.

ARTICLE II
Term of Existence

The Limited Liability Company shall begin existence on the date of filing of these Articles of Organization with the Florida Secretary of State, and shall have perpetual existence thereafter.

ARTICLE III
Principal Office and Mailing Address
of the Limited Liability Company

The mailing address and street address of the principal office of the Limited Liability Company shall be 819 Harbor Island, Clearwater, Florida 33767, with the privilege of having its offices (and branch offices) at other places within or without the State of Florida.

ARTICLE IV
Initial Registered Agent and Office

The initial registered office of the Limited Liability Company is 819 Harbor Island, Clearwater, Florida 33767. The initial registered agent at that address is MICHAEL J. SOVIE.

ARTICLE V
Management

The Limited Liability Company shall be managed by one (1) or more managers and is, therefore, a manager-managed company.

H15000280190 3

ARTICLE VI
Managers

The name and address of each Manager of the Limited Liability Company are:

Michael J. Sovie
819 Harbor Island
Clearwater, Florida 33767

Leah Sovie
819 Harbor Island
Clearwater, Florida 33767

IN WITNESS WHEREOF, the undersigned authorized representative has executed the foregoing Articles of Organization on the 24th day of November, 2015, and 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 Section 817.155 of the Florida Statutes.



Michael J. Sovie,
Authorized Representative

CERTIFICATE OF DESIGNATION
OF REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provision of Section 605.0113 of the Florida Statutes, the undersigned Limited Liability Company submits the following statement to designate a registered agent and registered office in the State of Florida.

1. The name of the Limited Liability Company is: FISHRX VENTURES, LLC.
2. The name and street address of the registered agent and office is MICHAEL J. SOVIE, 819 Harbor Island, Clearwater, Florida 33767.

FISHRX VENTURES, LLC

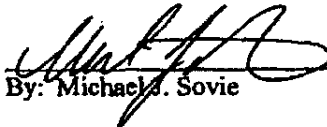


By: Michael J. Sovie,
Authorized Representative

H15000280190 3

The undersigned, having been named as registered agent for the above-named Limited Liability Company to accept service of process for the above-stated Limited Liability Company at the place designated in this certificate, hereby accepts the appointment as registered agent and agrees to act in this capacity. The undersigned further agrees to comply with the provisions of all statutes relating to the proper and complete performance of its duties, and is familiar with, and accepts the obligations of its position as registered agent for FISHRX VENTURES, LLC as provided for in Chapter 605 of the Florida Statutes.

Dated this 24th day of November, 2015.


By: Michael S. Sovie
"Registered Agent"

FILED
2015 NOV 24 AM 9:49
SECRETARY OF STATE
TALLAHASSEE, FLORIDA