

L15000198134

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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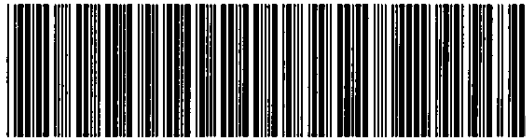
(Business Entity Name)

(Document Number)

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12/1/15

**COVER LETTER**

**TO: Registration Section  
Division of Corporations**

**SUBJECT:** Amphibian Flyer's  
Name of Limited Liability Company

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

John William Schmalz III

Name of Person

AmphibianFlyers.com

Firm/Company

3001 East Lake Hartridge Drive

Address

Winter Haver, Florida 33881

City/State and Zip Code

jwschmalz3@bellsouth.net

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

John Schmalz      561      414-6865  
at (      )  
Name of Person      Area Code      Daytime Telephone Number

Enclosed is a check for the following amount:

- ☒ \$125.00 Filing Fee      ☐ \$130.00 Filing Fee & Certificate of Status      ☐ \$155.00 Filing Fee & Certified Copy (additional copy is enclosed)      ☐ \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

**Mailing Address**

New Filing Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address**

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

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

EFFECTIVE DATE 11/17/15

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Amphibian Flyer's Limited Liability Company

(Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")

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ARTICLE II - Address:

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

Principal Office Address:

3001 East Lake Hartridge Drive  
Winter Haven, Florida 33881

Mailing Address:

3001 East Lake Hartridge Drive  
Winter Haven, Florida 33881

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:

John William Schmalz III

Name

3001 East Lake Hartridge Drive

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

Winter Haven

Florida

33881

City

State

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..*

John William Schmalz III  
Registered Agent's Signature (REQUIRED)

(CONTINUED)

**ARTICLE IV-**

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

**Title:**

"AMBR" = Authorized Member

"MGR" = Manager

President, Director

**Name and Address:**

John William Schmalz III  
3001 East Lake Hartridge Drive  
Winter Haven, Florida 33881

Secretary, Director

John William Schmalz III  
3001 East Lake Hartridge Drive  
Winter Haven, Florida 33881

Vice-President, Director

Scott Matthew Schmalz  
101 S. E. 7th Street  
Deerfield Beach, Florida 33441

Treasurer

Scott Matthew Schmalz  
101 S. E. 7th Street  
Deerfield Beach, Florida 33441

(Use attachment if necessary)

**ARTICLE V:** Effective date, if other than the date of filing: November 17, 2015 (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

**ARTICLE VI:** Other provisions, if any.

Wholesale & retail, Import & export, Airplanes, Boats, Cars & machinery

**REQUIRED SIGNATURE:**

  
**Signature of a member or an authorized representative of a member.**

This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes.  
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.

John William Schmalz III

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)**

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