

Florida Department of State Division of Corporations 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.

((H16000148760 3)))



H160001487603ABC0

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

RECEIVED

16 JUN 21 PM 4:59

TALLAHASSEE, FLORIDA

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

From: Account Name : CORP USA
 Account Number : 072450003255
 Phone : (305) 634-3694
 Fax Number : (305) 633-9696

TALLAHASSEE, FLORIDA

16 JUN 17 PM 1:07

FILED

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

Email Address: _____

FLORIDA LIMITED LIABILITY CO. SIEK MARINE LLC

Certificate of Status	0
Certified Copy	1
Page Count	04
Estimated Charge	\$155.00

112281

Please file on the day that was fax 6/17/16

Please call me if you have any questions.

Electronic Filing Menu

Corporate Filing Menu

Help

refax 6/21

JUN 22 2016

S. GILBERT



June 20, 2016

FLORIDA DEPARTMENT OF STATE
Division of Corporations

CORP USA

SUBJECT: SIEK MARINE LLC
REF: W16000043995

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The document submitted does not meet legibility requirements for electronic filing. Please do not attempt to refax this document until the quality has been improved.

If you have any further questions concerning your document, please call (850) 245-6052.

Valerie Herring
Regulatory Specialist II
New Filing Section

FAX Aud. #: H16000148760
Letter Number: 616A00012909

P.O. BOX 6327 - Tallahassee, Florida 32314



COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: SIEK MARINE LLC
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:

CAROLINE FORD

Name of Person

SIEK MARINE LLC

Firm/Company

1931 CORDOVA ROAD, STE 425

Address

FT LAUDERDALE, FL 33316

City/State and Zip Code

carolineelliseford@gmail.com

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

For further information concerning this matter, please call:

CAROLINE FORD

573

356-1506

at (

Name of Person

Area Code

Daytime Telephone Number

FILED

16 JUN 17 PM 1:07

CLERK OF THE COURT
JUDICIAL CIRCUIT IN AND FOR THE STATE
OF FLORIDA

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

STEK MARINE LLC

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

ARTICLE II - Address:

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

Principal Office Address:

Mailing Address:

1931 CORDOVA ROAD, STE 425
FT LAUDERDALE, FL 33316

SAME

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:

CAROLINE FORD

Name

1931 CORDOVA ROAD, STE. 425

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

FT. LAUDERDALE

FL

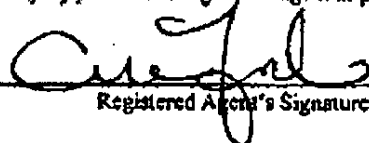
33316

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.



Registered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

ARTICLE IV-

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

Title:

"AMBR" - Authorized Member

"MGR" - Manager

MGR/AMBR

Name and Address:

BENJAMIN SIEK

1931 CORDOVA ROAD, STE 425

FT LAUDERDALE, FL 33316

MGR/AMBR

CAROLINE FORD

1931 CORDOVA ROAD, STE 425

FT LAUDERDALE, FL 33316

(Use attachment if necessary)

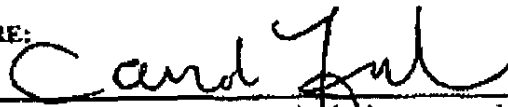
ARTICLE V: Effective date, if other than the date of filing: _____ (OPTIONAL)

(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.

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.

CAROLINE FORD

Typed or printed name of signer