

L16000222334

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

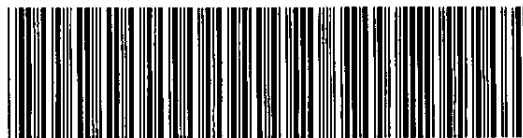
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



900292951379

12/08/16--01002--008 \*\*125.00

16 DEC -8 AM 9:40  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

12/14/16

# LEONARD ALTERMAN

---

ATTORNEY AT LAW

4035 Atlantic Boulevard • Jacksonville, Florida 32207  
Telephone: (904) 739-3440 • Fax: (904) 636-0856  
E-mail: alterlawjax@gmail.com • www.altermanlawyer.com

December 6, 2016

Corporate Records Bureau  
Division of Corporations  
Department of State  
Post Office Box 6327  
Tallahassee, FL 32314

Re: St. John's Yacht Sales, LLC

Gentlemen and Ladies:

I am enclosing an original and one copy of the Articles of Organization and Designation of Registered Agent of **St. John's Yacht Sales, LLC**. Also enclosed is a check in the amount of \$125.00 as payment for the following amounts:

\$100.00 - Filing Fee  
25.00 - Resident Agent Designation

**The email address for this organization to be used for future annual report notification is: [ryan@stjohnsyachtsales.com](mailto:ryan@stjohnsyachtsales.com)**

I would appreciate your returning the copy to me at your earliest convenience. Thank you for your attention to this matter.

Sincerely,



Leonard Alterman

LA/bjw  
Enclosures  
cc: Ryan Haney

ARTICLES OF ORGANIZATION OF  
**ST. JOHN'S YACHT SALES, LLC**  
A FLORIDA LIMITED LIABILITY COMPANY

16 DEC -8 AM 9:40  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

The undersigned, being authorized to execute and file these Articles of Organization, hereby certifies that:

**ARTICLE I — Name:**

The name of the limited liability company (hereinafter referred to as the "Company") is "ST. JOHN'S YACHT SALES, LLC".

**ARTICLE II — Address:**

The mailing address and street address of the principal office of the limited liability company are both:

8437 Perrys Park Road, St. Augustine, FL 32092-1916

**ARTICLE III — Registered agent, Registered Office, and Registered Agent's Signature:**

The name and the Florida street address of the registered agent are:

Ryan Haney  
8437 Perrys Park Road  
St. Augustine, FL 32092-1916

**ARTICLE IV MEMBERS**

The company shall be managed by its members.

**ARTICLE V — Management:**

The names and addresses of each member authorized to manage and control the Limited Liability Company are:

**Name and Address:**

**Title:**

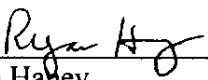
“AMBR” = Authorized Member

“MGR” = Manager

AMBR

Ryan Haney, Member  
8437 Perrys Park Road  
St. Augustine, FL 32092-1916

Dated this 1 day of December, 2016.

  
\_\_\_\_\_  
Ryan Haney

(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.)

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 obligation of my position as registered agent as provided for in Chapter 605, F.S.

B-15

Ryan Haney

Date: 12-1-16

16 DEC -8 AM 9:40  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA