

L17000055789

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

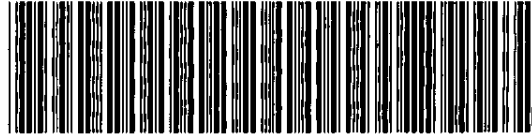
Special Instructions to Filing Officer:

OKay to file
per Brenda Y.

3/14/17

Office Use Only

6357-



100296336651

03/08/17--01002--016 **125.00

RECEIVED
DEPARTMENT OF STATE
17 MAR -8 PM 2:12

C. GOLDEN

MAR 14 2017

2017 MAR 14 10:59:12
TELETYPE

CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301
(850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

TOGETHER MARINE VENTURES, LLC

Signature _____

Requested by: _____

Name _____

Date _____

Time _____

Walk-In _____

Will Pick Up _____

Art of Inc. File _____

LTD Partnership File _____

Foreign Corp. File _____

L.C. File _____

Fictitious Name File _____

Trade/Service Mark _____

Merger File _____

Art. of Amend. File _____

RA Resignation _____

Dissolution / Withdrawal _____

Annual Report / Reinstatement _____

Cert. Copy _____

Photo Copy _____

Certificate of Good Standing _____

Certificate of Status _____

Certificate of Fictitious Name _____

Corp Record Search _____

Officer Search _____

Fictitious Search _____

Fictitious Owner Search _____

Vehicle Search _____

Driving Record _____

UCC 1 or 3 File _____

UCC 11 Search _____

UCC 11 Retrieval _____

Courier _____

2017 Nov 16 11:59:12



FLORIDA DEPARTMENT OF STATE
Division of Corporations

March 13, 2017

CAPITAL CONNECTION, INC.

SUBJECT: TOGETHER MARINE VENTURES, LLC
Ref. Number: W17000019835

We have received your document for TOGETHER MARINE VENTURES, LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You failed to make the correction(s) requested in our previous letter.

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all the appropriate places. One or more words may be added to make the name distinguishable from the one presently on file. A search for name availability can be made on the Internet through the Division's records at www.sunbiz.org.

Please note the name of a limited liability company must contain the words "Limited Liability Company," the abbreviation "L.L.C.", or the designation "LLC". The following suffixes are no longer acceptable: "Limited Company," "L.C.," "LC.," "Ltd.," and "Co."

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

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

Claretha Golden
Regulatory Specialist II
New Filing Section

Letter Number: 617A00004733

2017 MAR 13 10:59:12



FLORIDA DEPARTMENT OF STATE
Division of Corporations

March 9, 2017

CAPITAL CONNECTION, INC.

SUBJECT: TOGETHER MARINE VENTURES, LLC
Ref. Number: W17000019835

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Claretha Golden
Regulatory Specialist II
New Filing Section

Letter Number: 117A00004526

RECEIVED
DEPARTMENT OF STATE
17 MAR 10 PM 4:21

2017 MAR 13 PM 3:12
TALLAHASSEE, FL
FILING SECTION

TOGETHER MARINE VENTURES LTD., LLC
12378 SW 82nd Avenue
Miami, FL 33156

March 10, 2017

Florida Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

RE: Together Marine Ventures, LLC
Document No.: W17000019835

Together Marine Ventures LTD., LLC consents to let Together Marine Ventures, LLC use the name Together Marine Ventures, LLC. Both companies are under common control.

Best Regards,

Jeffrey M. Greenberg
Manager
Together Marine Ventures LTD., LLC

2017 MAR 13 PM 9:12
CLERK

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Together Marine Ventures, LLC

(Must contain 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:

2 South Biscayne Blvd., Suite 2680
Miami, FL 33131

Mailing Address:

2 South Biscayne Blvd., Suite 2680
Miami, FL 33131

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:

Bryn & Associates, P.A.

Name

2 South Biscayne Blvd., Suite 2680

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

Miami

FL

33131

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)

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

Name and Address:

Robert Garner

2 South Biscayne Blvd., Suite 2680

Miami, FL 33131

(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.

Robert Garner

Typed or printed name of signer

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)

2012 JUN 10 AM 9:12