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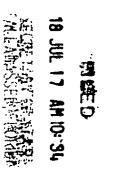
(Re	questor's Name)	
(Add	dress)	
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(Cit	y/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
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Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	





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T COLLINS
JUL 1 9 2018

# COVER LETTER

	Kew Filing Section Division of Corporations	•
SUBJECT	Gerig Nautical Concepts, LLC	· ·
300		e of Limited Liability Company
The enclos	sed Articles of Organization and f	ee(s) are submitted for filing.
Please rett	urn all correspondence concerning	this matter to the following:
	Russell D. Kaplan, Esq.	
		Name of Person
	Russell D. Kaplan, P.A.	
		Firm/Company
	7951 SW 6th Street, Suite 210	
		Address
	Plantation, FL 33324	
	russk@rdkpa.com	City/State and Zip Code
	E-mail address: (to	be used for future annual report notification)
For further i	information concerning this matter	, please call;
	Nicole Medina	954 763-7777 at ( )
	Name of Person	Area Code Daytime Telephone Number
Enclosed i	s a check for the following amoun	t:
]\$125.00 F	filing Fee \$130.00 Filing Fe Certificate of Sta	ce & S155.00 Filing Fee & S160.00 Filing Fee, certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)  Certified Copy (additional copy is enclosed)
	Mailing Address	Staget Address

## Mailing Address

1

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



#### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:	
The name of the Limited Liability Company	is:

Gerig Nautical Concepts, 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:

Princip:	il Office	Address:

Mailing Address:

7951 SW 6th Street, Suite 210	7951 SW 6th Street, Suite 210
Plantation, FL 33324	Plantation, FL 33324
	<u> </u>

## 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.)

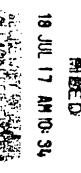
The name and the Florida street address of the registered agent are:

Russell D. Kaplan, I	Esq.	
	Name	
7951 SW 6th Street,	Suite 210	
Florida street addre	ss (P.O. Box <u>NOT</u> ac	cceptable)
Plantation	FL	33324
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.

REQUIRED)

(CONTINUED)



## ARTICLE IV-

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

Title:	Name and Address:
"AMBR" = Authorized Member	
"MGR" = Manager AMBR MGR	Stewart P. Dokes
AMDRAIGR	7951 SW 6th Street, Suite 210
	Plantation, FL 33324
<del> </del>	
	W = =
(Use attachment if necessary)	
If an effective date is listed, the date must be sp he date of filing.)	of tiling:
ARTICLE VI: Other provisions, if any.	
REOUIRED SIGNATURE:	
Signature of a mu	ember or an authorized representative of a member.
This document is execu	ted 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 thirth degree	e felony as provided for in s.817.155, F.S.

Russell D. Kaplan, Esq. Attorney for LLC

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)

