

Electronic Filing Cover Sheet

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To:	Division of Cor Fax Number	porations : (650)617-6381	19 FEB 27	SECRETA
From:	Account Number Phone		1 PH12: 14	ILED RY OF STATE CORPORATIONS
	port mailings. E	this business entity to be used for future Inter only one email address please.** DTOMYCPA.COM		

FLORIÐA LIMITED LIABILITY CO. FTL YACHT CHARTERS LLC

		Certificate of Status	1	
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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 - Name:

The name of the Limited Liability Company is:

FTL YACHT CHARTERS 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:

3108 NE 40TH CT	3108 NE 40TH CT
FT LAUDERDALE, FL 33308	FT LAUDERDALE, FL 33308

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:

Registered Agent, Registered Office, & Registered Agent's Signature: bility Company cannot serve as its own Registered Agent. You must designate an individual or entity with an active Florida registration.)	19 FE B	DIVISIO
Florida street address of the registered agent are:	3 27	RET T
JOHN BELLINI	PK	325
Name	:21	290 290
3108 NE 40 CT	·.>	
Florida street address (P.O. Box NOT acceptable)	F-	E -
FT LAUDERDALE FL 33308		•
City 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., d Agent's Signature (REQUIRED)

N BELLINI

(CONTINUED)

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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	JOHN BELLINI 3108 NE 40TH CT FT LAUDERDALE, FL 33308
AMBR	DAVID HACKERT 3108 NE 40TH CT FT LAUDERDALE, FL 33308
AMBR	LOUIS IANNUCCI 75 NORTH CENTRAL AVE ELMSFORD, NY 10523

(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.)

ARTICLE VI: Other provisions, if any.

REQUIRED SIGNATURE:

Signature of a member or an authorized representative of a member. (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.)

JOHN BELLINI

Typed or printed name of signce

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