# Electronic Articles of Organization For Florida Limited Liability Company

L20000014477 FILED 8:00 AM January 07, 2020 Sec. Of State tcline

## **Article I**

The name of the Limited Liability Company is: LOW TIDE TOURS LLC

### **Article II**

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

1541 NAPOLI DR E SARASOTA, FL. 34232

The mailing address of the Limited Liability Company is:

1541 NAPOLI DR E SARASOTA, FL. 34232

#### **Article III**

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

JASON M KOBZA 1541 NAPOLI DR E SARASOTA, FL. 34232

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.

Registered Agent Signature: JASON KOBZA

### **Article IV**

The name and address of person(s) authorized to manage LLC:

Title: AMBR JASON M KOBZA 1541 NAPOLI DR E SARASOTA, FL. 34232 US

Title: AMBR LAUREN C KOBZA 1541 NAPOLI DR E SARASOTA, FL. 34232 US

Title: AMBR DEREK D NUWER 1508 4TH AVE S #423 BIRMINGHAM, AL. 35233 US

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#### Article V

The effective date for this Limited Liability Company shall be:

01/07/2020

Signature of member or an authorized representative

Electronic Signature: JASON KOBZA

I am the member or authorized representative submitting these Articles of Organization and affirm that the facts stated herein are true. I am aware that 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. I understand the requirement to file an annual report between January 1st and May 1st in the calendar year following formation of the LLC and every year thereafter to maintain "active" status.