

L20000148815

(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



300342775633

04/13/20--01016--006 **125.00

2020 APR 13 PM 2:49
SECOND CLERK OF STATE
TALLAHASSEE, FL

FILED

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: yacht Carpenter, LLC.
Name of Limited Liability Company

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

William Raymond Fisher Jr
Name of Person

~~yacht Carpenter~~
Firm/Company

1804 SW 20th St Suite B
Address

Ft Lauderdale FL 33315
City/State and Zip Code

WILLRFISHER@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

William Fisher at (954) 245-1017
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- ☐ \$125.00 Filing Fee ☐ \$130.00 Filing Fee & Certificate of Status ☐ \$155.00 Filing Fee & Certified Copy (additional copy is enclosed) ☐ \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

Mailing Address

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

FILED
2020 APR 13 PM 2:49
TALLAHASSEE, FL
REG. DIV. OF STATE

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Yacht Carpenter, 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:

1804 SW 20th St Suite B
Fort Lauderdale FL
33315

Mailing Address:

1804 SW 20th St Suite B
Fort Lauderdale, Florida
33315

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:

William R Fisher
Name
1804 SW 20th St Suite B
Florida street address (P.O. Box **NOT** acceptable)
Fort Lauderdale FL 33315
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.

William R. Fisher
Registered Agent's Signature (REQUIRED)

(CONTINUED)

FILED
2020 APR 13 PM 2:49
CLERK OF STATE
TALLAHASSEE, FL

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:

WILLIAM FISHER
1704 SW 22ND ST ST B
FORT LAUDERDALE FLORIDA, 33315

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: 4-6-2002 (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:

William R. Fisher Jr.

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.

William R. Fisher Jr.

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)

2020 APR 13 PM 2:49
STATE OF FLORIDA
TALLAHASSEE, FL

FILED



FLORIDA DEPARTMENT OF STATE
Division of Corporations

April 15, 2020

WILLIAM RAYMOND FISHER JR
1804 SW 20TH ST SUITE B
FT LAUDERDALE, FL 33315

SUBJECT: @YACHT_CARPENTER, LLC.
Ref. Number: W20000037854

2020 APR 13 PM 2:50
STATE DEPT OF STATE
TALLAHASSEE, FL

FILED

We have received your document for @YACHT_CARPENTER, 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):

REJECTION IS BECAUSE THE @ SIGN IN THE BEGINING OF THE WORD WILL BE HARD TO FIND THE NAME ON SUNBIZ IF ANYONE IS LOOKING FOR IT AND DO NOT KNOW THAT THE SIGN IS IN FRONT.

Please return 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.

WILLIAM LAWRENCE
Regulatory Specialist II

Letter Number: 020A00008005

THANK YOU SO MUCH. PLEASE
REMOVE THE @ SYMBOL.
IT WILL READ
yacht-carpen-ter

WJL

2020 MAY 26 PM 12:26
STATE DEPT OF STATE
TALLAHASSEE, FL