

L21000154842

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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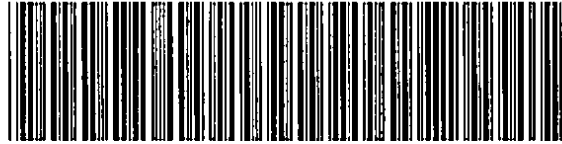
(Business Entity Name)

(Document Number)

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2021 MAR 15 PM 4:25
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

T. BURCH
APR 13 2021

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March 4, 2021

New Filing Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

RE: PREMIER WATER SPORTS RENTALS, LLC

Gentlemen:

Enclosed for filing please find the Articles of Organization to form the above-referenced Florida Limited Liability Company, together with our check in the amount of \$125.00 in payment of the filing fee.

Thank you for your prompt attention to this matter.

Very truly yours,

JAMES J. DORL, P.A.

By: 

Dona Marie Varney, Legal Assistant

/dmh
Encs.

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

PREMIER WATER SPORTS RENTALS, 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:

300 Sadowski Causeway, Suite 308

Kev Colony Beach, FL 33051

Mailing Address:

P.O. Box 510802

Kev Colony Beach, FL 33051-0802

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:

James J. Dori, Esq.

Name

5701 Overseas Highway, Suite 12

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

Marathon

Florida

33050

City

State

Zip

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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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.

[Signature]
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

Name and Address:

AMBR

Jeremy Merryman
300 Sadowski Causeway, Suite 308 (P.O. Box 510802)
Key Colony Beach, FL 33051

N/A

N/A

N/A

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STATE OF FLORIDA
TALLAHASSEE

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: Date of Filing. (OPTIONAL)

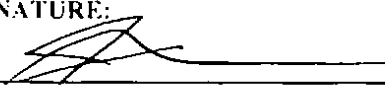
(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

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.

None.

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.

Jeremy Merryman

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)