

Division of Corporations

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Florida Department of State
Division of Corporations
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2021 JUL 15 PM 12:43
MAIL EPANASCI@PRACTICALLAWYER.COM

21 JUL 15 PM 12:43

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: EPANASCI@PRACTICALLAWYER.COM

FLORIDA LIMITED LIABILITY CO.
JessConn Charters, LLC

Certificate of Status	1
Certified Copy	0
Page Count	03
Estimated Charge	\$130.00

2021 JUL 15 PM 3:01

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY**ARTICLE I - Name:**

The name of the Limited Liability Company is:

JessConn 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:**201 OCEAN REEF DRIVE H-01
KEY LARGO, FL 33037201 OCEAN REEF DRIVE H-01
KEY LARGO, FL 33037**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:

SCOTT BURKE

Name

201 OCEAN REEF DRIVE H-01Florida street address (P.O. Box **NOT** acceptable)KEY LARGO FL 33037

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..


Registered Agent's Signature (REQUIRED)**SCOTT BURKE**

(CONTINUED)

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21 JUL 15 PM 12:43
CLERK OF CIRCUIT COURT
JESSIE A. BURKE

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ARTICLE IV-

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


<u>Title:</u>	<u>Name and Address:</u>
"AMBR" = Authorized Member	SCOTT BURKE
"MGR" = Manager	201 OCEAN REEF DRIVE H-01
MGR	KEY LARGO, FL 33037

(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.)

SCOTT BURKE

Typed or printed name of signee

21 JUL 15 PM 12:43
FILED
CLERK OF THE COURT
JUL 15 2021
TALLAHASSEE, FLORIDA