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	(Requestor's Name)
	(Address)
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	(City/State/Zip/Phone #)
PICK-UP	WAIT MAIL
,	(Business Entity Name)
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TALLAHASSEF MATE

CT CORP

3458 Lakeshore Drive, Tallahassee, FL 32312 850-656-4724

Date: 02/09/2022

	Acc#I20160000072
Name:	Ethos Yacht Charters, LLC
Document #:	
Order #:	14142781
Certified Copy of Arts & Amend: Plain Copy: Certificate of Good Standing: Certified Copy of Apostille/Notarial Certification:	Country of Destination:
Filing:	Number of Certs: Certified: ✓ Plain: COGS:
Availability Document Examiner Updater Verifier W.P. Verifier Ref#	Amount: \$ 155.00

Thank you!

COVER LETTER

	w Filing Section vision of Corporations			
	Ethos Yacht Charters, LL	Ĉ		
SUBJECT:		Same of Limited Liab	bility Company	
The enclose	d Articles of Organization a	nd fee(s) are submitt	ed for filing.	
Please retur	n all correspondence concer	ning this matter to th	e following:	
	Marti Peach Nikolaus			
		Name	of Person	
	Benesch, Friedlander, Copl	an & Aronoff, LLP		
•		Firm/6	Company	
	200 Public Square, Suite 23	00		
•		Ad	dress	
	Cleveland, Ohio 44114			
	mikolaus@beneschlaw.con	•	and Zip Code	
	_		e annual report notificat	ion)
For further in	formation concerning this m	atter, please call:		
•	Claudia Taller	216 at (363-4166	
-	Name of Person	Area Code	Daytime Telephor	ne Number
Enclosed is	a check for the following an	ount:		
□\$125.001	_	ling Fee & S	155.00 Filing Fee & ified Copy onal copy is enclosed)	☐\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Address New Filing Section Division of Corporation P.O. Box 6327 Tallahassee, FL 3231-		Street Address New Filing Section D The Centre of Tallah 2415 N. Monroe Stre Tallahassee, FL 3230	assee et, Suite 810

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 - Name: The name of the Limited Liabilit	y Company is:	•	
Ethos Yacht Charters	, LLC		
(Must conta	nin the words "Limited	Liability Company	, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street ad	ddress of the principal o	office of the Limited	d Liability Company is:
<u>Principa</u>	al Office Address:		Mailing Address:
6740 N Highway A L	A	674	10 N Highway ATA
Hutchinson Island, F			tchinson Island, Florida 34949
ARTICLE III - Registered Age (The Limited Liability Company another business entity with an a	cannot serve as its owr	i Registered Agent.	ent's Signature: You must designate an individual or
The name and the Florida street a	iddress of the registere	d agent are:	
	C T Corporation Sys	stem	
		Name	
	1200 South Pine Isla	and Road	
	Florida street addres	ss (P.O. Box <u>NOT</u> :	acceptable)
	Plantation	Florida	33324
	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..

By Coura R. Broderick, Assistant Secretary
Registered Agent's Signature (REQUIRED)

(CONTINUED)

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SELLAHASSEE, FALLAHASSEE, FALLAHASSEE

ARTICLETY	· •	
The name and	address of each	De

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	Kenneth L. Cooper
	6740 N Highway ATA
	Hutchinson Island, Florida 34949
(Use attachment if necessary)	
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