122000060097

(R	Requestor's Name)
A)	ddress)
(A	ddress)
(C	ity/State/Zip/Phone #)
PICK-UP	WAIT MAIL
(É	Business Entity Name)
(C	Ocument Number)
Certified Copies	Certificates of Status
Special Instructions to	o Filing Officer:

Office Use Only



800376361748

02/15/22--01018--018 **125.00

2022 FEB 15 : RM 3: 20

2027 FEB 15 PH 3: 00

CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301 (850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

B & C MARINE LLC Art of Inc. File LTD Partnership File Focign Corp. File L.C. File Ficilitious Name File Trade/Service Mark Merger File Art of Anned. File RA Resignation Dissolution / Withdrawal Annual Report / Reinstatement Cert. Copy Phuto Copy Certificate of Good Standing Certificate of Fictifious Name Certificate of Fictifious Name Certificate of Fictifious Name Certificate of Fictifious Name Corp Record Search Officer Search Fictitions Search Fictitions Search Fictificate Search Driving Record Vehicle Search Driving Record UCC 11 Search UCC 11 Search UCC 11 Search UCC 11 Search UCC 11 Retrieval				
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Certificate of Status				Photo Copy
Certificate of Fictitious Name				Certificate of Good Standing
Corp Record Search				Certificate of Status
Officer Search			j	Certificate of Fictitious Name
Fictitious Search				Corp Record Search
Fictitious Owner Search				Officer Search
Vehicle Search				Fictitious Search
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Courier Cour	o.gacce			Vehicle Search
UCC 11 Search				Driving Record
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Walk-In Will Pick Up Courier				UCC 11 Search
•	ivame	Date III	ne	UCC 11 Retrieval
172 Annoer's Printing - Thomissine GA 8/00		•		Courier

COVER LETTER

	New Filing Section Division of Corporations		
SUBJEC	B & C Marine LLC		
30000		of Limited Liability Company	
The enclo	osed Articles of Organization and fe	(s) are submitted for filing.	
Picase re	turn all correspondence concerning	is matter to the following:	
	William Muchlhauser		
		Name of Person	
	B & C Marine LLC		
		Firm/Company	
	1026 Von Phister Street		
		Address	
	Key West FL 33040		
	avainia@-a-a-k-a-d-a-a-	City/State and Zip Code	
	cvainio@ramsheadgroup.com E-mail address: (to b	used for future annual report notification	on)
For further	information concerning this matter,	·	,
	Christina Vainio	443 622-9128	
	Name of Person	Area Code Daytime Telephone	: Number
Enclosed	is a check for the following amount		
\$125,00 I		& \$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 Corporation Clifton Building 2661 Executive Center	

Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - N The name of the	ame: Limited Liability Company is:			
8 &	C Marine LLC (Must contain the words "Lim	ited Liability Company	"IIC "Ar"IIC"	
. DELCY D II		ned Elability Company	, E.E.C., or EEC.)	
ARTICLE II - A The mailing add	Address: ress and street address of the princi	pal office of the Limited	l Liability Company is:	
	Principal Office Address:		Mailing Address:	
1026	Von Phister Street	102	6 Von Phisteer Street	
Key	West FL 33040	Key	West FL 33040	
(The Limited Lia	Registered Agent, Registered Offi ability Company cannot serve as its entity with an active Florida regist	own Registered Agent.	You must designate an individu	al or
The name and th	e Florida street address of the regis	cred agent are:		
	William Muchlh	auser		
		Name		
	1026 Von Phiste	r Street		
	Florida street ad	dress (P.O. Box <u>NOT</u> a	cceptable)	
	Key West	FL	33040	
	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..

Registered Agent's Signature (REQUIRED)

(CONTINUED)



Title:		Name and Address:
	norized Member	
"MGR" = Mana		
<u>AMBR</u>		William Muchlhauser
		1026 Von Phister Street
		Key West FL 33040
AMBR		Charles Ball
<u> </u>		1037 United Street
		Key West FL 33040
		Key West FL 33040
		
		
(Use attachment LE V: Effective diffective date is list	ate, if other than the date	of filing: 2/1/2022 (OPTIONAL)
LE V: Effective d ffective date is list of filing.) If the date inserted ument's effective of	ate, if other than the date ed, the date must be spe in this block does not me date on the Department of	ecific and cannot be more than five business days prior to or 90 days neet the applicable statutory filing requirements, this date will not be lis
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LE V: Effective d ffective date is list e of filing.) If the date inserted ument's effective of LE VI: Other prov	in this block does not a date on the Department of isions, if any. GNATURE: Signature of a me This document is execute am aware that any false	mber or an authorized representative of a member. ed in accordance with section 605.0203 (1) (b), Florida Statutes.
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Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent \$30.00 Certified Copy (Optional)

ARTICLE IV-

\$ 5.00 Certificate of Status (Optional)