

# L22000167037

<https://efile.sunbiz.org/scripts/efilcovr.exe>

Division of Corporations

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

**Note: Please print this page and use it as a cover sheet.** Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H22000144031 3)))



H220001440313ABCR

**Note: DO NOT** hit the REFRESH/RELOAD button on your browser from this page.  
Doing so will generate another cover sheet.

To: Division of Corporations  
Fax Number : (850)617-6381

From: Account Name : BARRON & REDDING, P.A.  
Account Number : 073617000710  
Phone : (850)785-7454  
Fax Number : (850)785-2999

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

Email Address: \_\_\_\_\_

RECEIVED

2022 APR 21 AM 8:25

CORPORATIONS  
COMMERCIAL  
SERVICESSECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2022 APR 21 PM 1:16

FILED

FLORIDA LIMITED LIABILITY CO.  
BIG FIN FISHING, LLC

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$125.00

D. O'KEEFE

APR 22 2022

Fax Audit No. H22000144031 3

**ARTICLES OF ORGANIZATION FOR  
BIG FIN FISHING, LLC****ARTICLE I  
NAME**

The name of the limited liability company is **BIG FIN FISHING, LLC**

**ARTICLE II  
ADDRESS**

The mailing address and street address of the principal office of the limited liability company are:

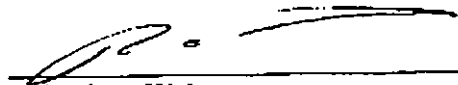
Principal Office Address  
709 Wild Heron Way  
Panama City Beach, FL 32413

Mailing Address  
709 Wild Heron Way  
Panama City Beach, FL 32413

**ARTICLE III  
REGISTERED AGENT**

The name and Florida street address of the registered agent is Barron & Redding, P.A., 220 McKenzie Avenue, Panama City, FL 32401.

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 provision of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position a registered agent as provided for in Chapter 605, F.S.

  
\_\_\_\_\_  
Roland W. Kiehn  
Authorized Representative

**ARTICLE IV  
MANAGEMENT**

The name and address of the Authorized Members are as follows:

Jerald Kent Finley, Jr.  
709 Wild Heron Way  
Panama City Beach, FL 32413

2022 APR 21 PM 1:16  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

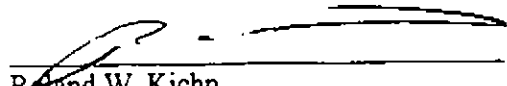
FILED

Fax Audit No. H22000144031 3

Fax Audit No. H22000144031 3

Jennifer Elizabeth Finley  
709 Wild Heron Way  
Panama City Beach, FL 32413

*In accordance with Section 605.0203(1)(b), F.S., the execution of this document constitutes an affirmation under penalties of perjury that the facts stated herein are true. I am aware that any false information submitted in a document to the Secretary of State constitutes a third degree felony as provided for in Section 817.155, F.S.*

  
\_\_\_\_\_  
Roland W. Kichn  
Authorized Agent

FILED

2022 APR 21 PM 1:16

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Fax Audit No. H22000144031 3