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Division of Corporations

Fax Number

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: (850)617-6381

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.

Account Number : 120000000019 Phone : (305)552-5973 Fax Number : (305)675-5944

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

Email Address:

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Note: Note to be open the second to be open to

FLORIDA LIMITED LIABILITY CO. DOUG WRIGHT POWERBOATS, LLC.

Certificate of Status	1
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Corporate Filing Menu

Help

			TTED LIABILITY COMPANY	
ARTICLE I - Name:				
The name of the Limited Lia	bility Company is:			
Doug Wright Po	werboats, LLC.			
(Must	contain the words "Limited Liab	ility Com	pany, "L.L.C.," or "LLC.")	
ARTICLE II - Address: The mailing address and stre	ect address of the principal office	of the Lir	nited Liability Company is:	
<u>Pri</u>	ncipal Office Address:		Mailing Address:	
2910 Dusa Drive	:		88005 Overseas Highway	
Melbourne, FL 3	32934		#10-214	
			Islamorada, FL 33036	
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(CONTINUED)

2022 APR 22 AH 9: 03

ARTICLE IV-

Title:	Name and Address:
"AMBR" = Authorized Member	
"MGR" = Manager	
MGR	Juan Adan, Jr.
	88005 Overseas Highway #10-214
	Islamorada, FL 33036
(Use attachment if necessary) LEV: Effective date, if other than flective date is listed, the date nu	the date of filing: (OPTIONAL) t be specific and cannot be more than five business days prior to or 90 days a
LEV: Effective date, if other than flective date is listed, the date nur	t be specific and cannot be more than five business days prior to or 90 days a es not meet the applicable statutory filing requirements, this date will not be list
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