

H23000429216

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.

((H23000324246 3)))



H230003242463ABC-

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 : HUBCO
Account Number : 104662003400
Phone : (516)935-3940
Fax Number : (516)935-3088

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

Email Address: stevematthewsd@gmail.com

FLORIDA LIMITED LIABILITY CO.
FLUID DYNAMIC ENDEAVORS LLC

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

RECEIVED
2023 SEP 14 PM 3:20
CLERK OF SUPERIOR COURT
TALLAHASSEE, FL

FILED
2023 SEP 14 AM 8:26
SECRETARY OF STATE
TALLAHASSEE, FL

H23000324246

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

FLUID DYNAMIC ENDEAVORS 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:**1209 SE OCEAN BLVD
STUART, FLORIDA 349961209 SE OCEAN BLVD
STUART, FLORIDA 34996**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:

STEPHEN MATTHEWS

Name

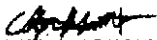
1131 13TH STFlorida street address (P.O. Box **NOT** acceptable)STUART

City

FL 34996

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..


Stephen Matthews, 2023 SEP 14 13:27

Registered Agent's Signature (REQUIRED)

STEPHEN MATTHEWS

(CONTINUED)

Page 1 of 2

FILED
2023 SEP 14 AM 8:26
SEC. OF STATE
TALLAHASSEE, FL

H23000324246

H23000324246

ARTICLE IV-

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

Title:

"AMBR" = Authorized Member

"MGR" = Manager

AMBRAMBR**Name and Address:**STEPHEN MATTHEWS1131 13TH STSTUART, FL 34996TAMMY MATTHEWS1131 13TH STSTUART, FL 34996

(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:**

 Stephen Matthews (Date: 14 SEP 2023)
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.)

STEPHEN MATTHEWS

Typed or printed name of signer

FILED
 2023 SEP 14 AM 8:26
 SECRETARY OF STATE
 TALLAHASSEE, FL

H23000324246