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(Re	questor's Name)	
(Ad	dress)	
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PICK-UP	☐ WAIT	MAIL
(Bı	siness Entity Nar	me)
(Do	ocument Number)	
Certified Copies	_ Certificate:	s of Status
Special Instructions to	Filing Officer:	

Office Use Only

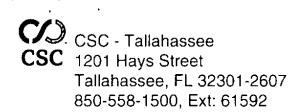


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ALLAHASSEE, FLORG



To: Department Of State, Division Of Corporations

From: Alexxis Weiland-Sorenson

Ext: 61592 Date: 02/02/24

Order #: 1413636-1

Re: Cole Yacht Management, LLC

Processing Method: Routine

TO WHOM IT MAY CONCERN:

Enclosed please find:

Certificate of Formation/Incorporation

Amount to be deducted from our State Account: \$155.00 - FL State Account Number:

120000000195

AUTH:

Please take the following action:

File in your office on basis

Issue Proof of Filing

Special Instructions:

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

COVER LETTER

	iew Filing Section Division of Corporations		
SUBJECT	Cole Yacht Management, LLC		
30000.0	Name o	f Limited Liability Company	
The enclos	sed Articles of Organization and fee(s) are submitted for filing.	
Please reti	ım all correspondence concerning th	is matter to the following:	
	Brian A. Cordero		
		Name of Person	
	Woods Weidenmiller, Michetti &	Rudnick, LLP	
	-	Firm/Company	
	9045 Strada Stell Court, 4th Floor		
		Address	
	Naples, FL 34109		
	h	City/State and Zip Code	
	bcordero@lawfirmnaples.com E-mail address: (to be	used for future annual report notifica	ation)
For further i	nformation concerning this matter, p	olease call:	
	Brian A. Cordero	239 325-4070 at ()	
	Name of Person	Area Code Daytime Telepho	one Number
Enclosed i	s a check for the following amount:		
□\$125.00	Filing Fee		□\$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	Street Address New Filing Section I The Centre of Talla 2415 N. Monroe Str	hassee

Tallahassee, FL 32303

Tallahassee, FL 32314

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

Ā	R	TI	ICI	.E	Т	- N	a	me:
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The name of the Limited Liability Company is:

Cole Yacht Management, LLC

(Must contain 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:

Prin	cipal	Office	Address:

Mailing Address:

128 Jamaica Drive	128 Jamaica Drive
Naples, FL 34113	Naples, FL 34113

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:

WWMR Statutory Agent, LLC	
Name	

Name

9045 Strada Stell Court, 4th Floor

Florida street address (P.O. Box NOT acceptable)

Naples	FL	34109	
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)

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ARTICLE IV-

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

Title:	Name and Address:
"MGR" = N	Authorized Member
	-
MGR	Jacob W. Cote 128 Jamaica Drive Naples El 3.1113
	Naples, FL 34113
 	
ARTICLE V: Effecti	nent if necessary) ve date, if other than the date of filing:
the date of filing.) Note: If the date inse	rted in this block does not meet the applicable statutory filing requirements, this date will not be listed as ive date on the Department of State's records.
ARTICLE VI: Other	·
REOUIRE	2 SIGNATURE: DocuSigned by:
	Julia 1
	Signature of a member or an authorized representative of a member. This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. 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.
	Javab W. Cola
	Jacob W. Cole Typed or printed name of signee
	· · · · · · · · · · · · · · · · · · ·

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)