

5/24/24, 12:30 PM

Division of Corporations

# Florida Department of State

## Division of Corporations

### Electronic Filing Cover Sheet

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

Email Address: Justinelikofer@gmail.com

### FLORIDA LIMITED LIABILITY CO.

#### Inlet Shores Dock Association LLC

Certificate of Status	1
Certified Copy	0
Page Count	04
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Audit # H24000186088  
**ARTICLES OF ORGANIZATION FOR FLORIDA  
LIMITED LIABILITY COMPANY**

**ARTICLE I**

**Name and Address**

The name of this Limited Liability Company is:

**Inlet Shores Dock Association LLC**

The mailing address and street address of the Limited Liability Company are:

**5351 Bridge Street, Unit 107  
Tampa, FL 33611**

**ARTICLE II**

**Term of Existence**

This Limited Liability Company shall have perpetual existence, commencing upon the date of filing of these Articles with the Florida Department of State.

**ARTICLE III**

**Purpose and Powers**

This Limited Liability Company is organized for the purpose of transacting any and all lawful business for which a Limited Liability Company may be organized under the laws of the State of Florida.

**ARTICLE IV**

**Powers**

The Limited Liability Company shall have the powers granted to a Limited Liability Company under the laws of the State of Florida:

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\_\_\_\_\_  
This form was prepared with the assistance of CourtAccess Centers LLC, a non-lawyer located at 13046 Race Track Road, Suite 131, Tampa, FL 33626, 813-875-1333.

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**ARTICLE V**  
**Initial Registered Office and Agent**

The street address of the initial registered office of this Limited Liability Company is:

**5351 Bridge Street, Unit 107**  
**Tampa, FL 33611**

and the name of its registered agent at such address is:

**Justin Elikofer**

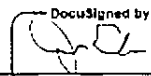
**ARTICLE VI**  
**Management**

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

**Name and Address**

**Justin Elikofer, Authorized Member**  
**5351 Bridge Street, Unit 107**  
**Tampa, FL 33611**

Dated: Friday, May 24, 2024

DocuSigned by:  


Justin Elikofer, Authorized 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.**

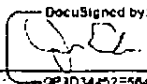
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**ACCEPTANCE BY REGISTERED AGENT**

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..

Date: May 24, 2024

DocuSigned by:  
  


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OP ID 34472=5640F  
 Justin Ehrkoter