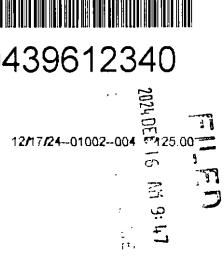


(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



000439612340



CORPORATE ACCESS,

When you need ACCESS to the world

INC.

236 East 6th Avenue. Tallahassee, Florida 32303

P.O. Box 37066 (32315-7066) (850) 222-2666 or (800) 969-1666. Fax (850) 222-1666

WALK IN

	PIC	K UP: <u>JENA 12/16</u>	
	CERTIFIED COPY		
XX	РНОТОСОРУ		
	CUS		
XX	FILING	I.I.C	··· >>
1.	KEY LARGO YACHT (CORPORATE NAME AND DO		2024 DE C
2.			0 1
	(CORPORATE NAME AND DO	CUMENT #)	9:17
3.	(CORPORATE NAME AND DO	OCUMENT #)	
4.	(CORPORATE NAME AND DO	CUMENT #)	
5.	(CORPORATE NAME AND DO	OCUMENT#)	, . .
6.			
	(CORPORATE NAME AND DO	OCUMENT#)	
SPECIA	L INSTRUCTIONS:		
	_		

COVER LETTER

	New Filing Sec Division of Cor					
	'~ .	112000 /02	ch ECL	15 HS CLC		
SUBJEC	T:	LARGO /VI Name of L	imited Liabili	ty Company	 -	
The encl	osed Articles of	Organization and fee(s)	ire submitted	for filing.		
Please re	eturn all correspo	ondence concerning this r	natter to the f	ollowing:		
		Belin F) Vesks			
			Name of	Person		2024 DEQ 1.6 F.1 9: 4.7
						E
			Firm/Co	mpany		DEU 16 F.119
		1				
1452 MERCADU AVENVE				<u>C</u>		
			Addr	ess		
		COMPa	GARG	EX F1 33 d Zip Code D A-06. COB	146	
			City/State an	d Zip Code		
		fres MS	OCHOR	D AOC. CUI	<u> </u>	_
	Ī	E-mail address: (to be use	ed for future a	nnual report notificati	ion)	
For furthe	r information co	ncerning this matter, plea	ise call:			
	Beli	a Plesits at (305	790240	0	
	Nam	e of Person	Area Code	Daytime Telephon	e Number	
Enclose	d is a check for t	he following amount:				
	.00 Filing Fee	□\$130.00 Filing Fee Certificate of Status	Certifi	5.00 Filing Fee & ed Copy al copy is enclosed)	Certified C	of Status &
		ig Address		Street Address	, , .	
		iling Section on of Corporations		New Filing Section D The Centre of Tallah		
		lox 6327		2415 N. Monroe Stre	et, Suite 810	
	Tallah	assee, FL 32314		Tallahassee, FL 3230	3	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

\	LARGO YACH F CLUB # 1 contain the words "Limited Liability C	ompany, c.c.c., or	JUG.)
RTICLE II - Address: he mailing address and st	reet address of the principal office of the	Limited Liability Com	pany is:
<u>Pr</u>	incipal Office Address:	<u>Ma</u>	iling Address:
1453	MEKCHONAVO	1452	MEVELLADO AVE GABLES EI 331
6000	4 4 A A		1. a Bi - 2177:
RTICLE III - Registere he Limited Liability Con other business entity wit	d Agent, Registered Office, & Register apany cannot serve as its own Registered than active Florida registration.)	red Agent's Signature Agent. You must desig	:
ARTICLE III - Registere The Limited Liability Con unother business entity wit	d Agent, Registered Office, & Registempany cannot serve as its own Registered than active Florida registration.)	red Agent's Signature Agent. You must desig	:
ARTICLE III - Registere The Limited Liability Con nother business entity wit	d Agent, Registered Office, & Register of Agent, Registered as its own Registered than active Florida registration.) Street address of the registered agent are: Name	red Agent's Signature Agent. You must desig	: gnate an individual or
ARTICLE III - Registere The Limited Liability Con unother business entity wit	d Agent, Registered Office, & Register apany cannot serve as its own Registered than active Florida registration.)	red Agent's Signature Agent. You must design CCMDO AVE	: gnate an individual or
ARTICLE III - Registere The Limited Liability Con unother business entity wit	d Agent, Registered Office, & Register of Agent, Registered as its own Registered han active Florida registration.) Street address of the registered agent are: Name	red Agent's Signature Agent. You must design 2 C MO ANG	egnate an individual or

(CONTINUED)

Registered Agent's Signature (REQUIRED)

ARTICLE IV-

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

Title:	Name and Address:	
"AMBR" = Authorized Member		
"MGR" = Manager ⋈ ७ &	Bis Pas as and trop late Pier	
	POPOLO OCHOO	
AMBR	Bulin Prests	
RM B C	L. TOWAY NO. O. Haya	
(LEUPOUNC OCHON	
		2
AMBIC	CHROLINA PENARAMA	2024 DEC 1.5
		5 1
	-	<u> </u>
(Use attachment if necessary)		
RTICLE V: Effective date, if other than the date	e of filing: (3/16/2024 (OPTIONAL))	1.7
If an effective date is listed, the date must be sp	pecific and cannot be more than five business days prior to or 90	days after
ne date of filing.) Note: If the date inserted in this block does not:	meet the applicable statutory filing requirements, this date will not	be listed as
he document's effective date on the Department		
RTICLE VI: Other provisions, if any.		
		
		
REQUIRED SIGNATURE:		
	Puss	
	ember or an authorized representative of a member.	
This document is execu	ited in accordance with section 605.0203 (1) (b), Florida Statutes.	
constitutes a third degre	e information submitted in a document to the Department of State te felony as provided for in s.817.155, F.S.	
Beli	Typed or printed name of signee	
	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)