

CONNIE H. SWEENEY, CPA
 HOLLAND & KNIGHT 905-5657

Requestor's Name
 315 SOUTH CALHOUN STREET
 Address
 Tallahassee, Florida 32301
 City/State/Zip Phone #
 224-7000

L98000003056

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1. Mangrove Bay Outfitters, LLC
 (Corporation Name) (Document #)
2. 00789-0115-00524-00671
 (Corporation Name) specific (Document #)
Amounts on
3. Prop + Anticipated
 (Corporation Name) (Document #)
4. _____
 (Corporation Name) (Document #)

FILED IN STATES
 SECRETARY OF CORPORATIONS
 DIVISION OF CORPORATIONS
 98 DEC - 8 AM 11:10

- Walk-in Pick up time 2:00 Certified Copy
 Mail out Will wait Photocopy Certificate of Status

NEW FILINGS	
<input type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input checked="" type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/ Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

400002681264-0
 -11/05/98--01060--014
 ****285.00 ****285.00

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation
<input type="checkbox"/>	<u>UCC</u>

REGISTRATION/ QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

7
 MK
 12/8/98

RECEIVED
 98 NOV - 5 AM 11:36

W98-25089

Examiner's Initials



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State

December 2, 1998

HOLLAND & KNIGHT

SUBJECT: MANGROVE BAY OUTFITTERS, LLC
Ref. Number: W98000025089

FILED STATE
SECRETARY OF CORPORATIONS
98 DEC -8 AM 11:10

We have received your document for MANGROVE BAY OUTFITTERS, LLC and your check(s) totaling \$285.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You failed to make the correction(s) requested in our previous letter.

The affidavit must include the agreed value and a description of any property contributed by the members. If no property has been contributed, state that on the affidavit.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6967.

Michelle Hodges
Document Specialist

Letter Number: 298A00053941

RECEIVED

98 DEC -8 AM 10:32

DIVISION OF CORPORATIONS

HOLLAND & KNIGHT
WALK IN
PICK UP AT 1:00

Resubmittal

Mangrove Bay Outfitters, LLC

ARTICLES OF ORGANIZATION

The undersigned being a duly authorized representative of Member and acting as organizer of a limited liability company under and pursuant to the Florida Limited Liability Company Act, Chapter 608, Florida Statutes, does hereby adopt the following Articles of Organization:

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
98 DEC -8 AM 11:10

ARTICLE I. NAME

The name of the Limited Liability Company shall be Mangrove Bay Outfitters, LLC.

ARTICLE II. DURATION

The period of the Company's duration shall commence on the date of filing of these Articles of Organization and shall exist perpetually, unless terminated (i) in accordance with the Company's Regulations, (ii) by the unanimous written agreement of all Members, (iii) by the death, retirement, resignation, expulsion, bankruptcy or dissolution of a Member, or (iv) upon the occurrence of any other event which terminates the continued membership of a Member. However, upon any such termination event, the existence and business of the Company may be continued with the consent of all the remaining Members of the Company, or by amendment of these Articles of Organization providing for the continued existence of the Company.

ARTICLE III. PURPOSE

The purpose for which the Company is being formed is to engage in any activity or business permitted under the laws of the United States and the State of Florida.

ARTICLE IV. ADDRESS OF PRINCIPAL OFFICE

The mailing address and the street address of the principal office of the Company shall be:

3915 Kristin Place
Valrico, Florida 33594

ARTICLE V. REGISTERED AGENT

The name and street address of the initial registered agent of the Company in the State of Florida is:

Michael B. Davis
3915 Kristin Place
Valrico, Florida 33594

A written statement as prescribed by the Florida Department of State pursuant to Section 608.407(1)(d), Florida Statutes, is attached to these Articles of Organization.

ARTICLE VI. ADDITIONAL MEMBERS

Additional Members may be admitted upon the approval of all the Members of the Company, upon the written application of such new Member, in the manner set forth in the Regulations of the Company.

ARTICLE VII. MANAGEMENT

The business of the Company shall be conducted, carried on, and managed by no fewer than one (1) Manager, who shall be elected annually by the Members of the Company in the manner prescribed by and provided in the Regulations of the Company. The Managers shall have the right and responsibilities accorded them as more particularly described in the Regulations of the Company. The name and address of the initial Manager is as follows:

Michael B. Davis
3915 Kristin Place
Valrico, Florida 33594

The Manager shall serve in such capacity until the first annual meeting of the Members or until his successor(s) is (are) are duly elected and qualified.

ARTICLE VIII. AMENDMENT OF REGULATIONS

The power to adopt, alter, amend, or repeal Regulations of the Company shall be vested in the Members of the Company.

SECRETARY OF STATE
DIVISION OF CORPORATIONS
98 DEC -8 AM 11:10

ARTICLE IX. AFFIDAVIT

Attached to these Articles of Organization is the Affidavit required by Section 608.407(2) Florida Statutes.

IN WITNESS WHEREOF, the undersigned, as authorized representative of a Member, has executed these Articles of Organization on this 29 day of October, 1998.

Michael B. Jans
Member

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
DEC - 8 AM 11:10

CERTIFICATE DESIGNATING PLACE OF BUSINESS OR DOMICILE FOR THE SERVICE OF PROCESS WITHIN THIS STATE, NAMING AGENT UPON WHOM PROCESS MAY BE SERVED.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
98 DEC -8 AM 11:10

Pursuant to Chapter 48.091, Florida Statutes, or other more applicable statute, the following is submitted:


That Mangrove Bay Outfitters, LLC, desiring to organize under the laws of the State of Florida with its initial registered office, as indicated in the Articles of Organization, at 3915 Kristin Place, City of Valrico, County of Hillsborough, State of Florida, has named Michael B. Davis located at 3915 Kristin Place, City of Valrico, County of Hillsborough, State of Florida, as its agent to accept service of process within this state.

ACKNOWLEDGMENT:

Having been named to accept service of process for the limited liability company named above, at the place designated in this certificate, I agree to act in that capacity, to comply with the provisions of the Florida Limited Liability Company Act, and am familiar with, and accept, the obligations of that position.

Dated: 10/29/98

Mangrove Bay Outfitters, LLC


Registered Agent

AFFIDAVIT

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
98 DEC -8 AM 11:10

STATE OF FLORIDA

COUNTY OF PINELLAS

Michael B. Davis, being first duly sworn, deposes and says:

1. That he is a duly authorized representative of a Member of Mangrove Bay Outfitters, a Florida limited liability company (the "Company");
2. That the Company has at least two Members;
3. That the Members of the Company have contributed \$1,500.00 to the capital of the Company; and
4. That the Members of the Company are expected to contribute \$120,000^(cash) of additional capital to the Company.
5. That the Members of the Company are expected to contribute \$50,000^(intellectual) of property to the Company.

And further affiant sayeth not.

Michael B. Davis
Michael B. Davis, Member

The foregoing instrument was acknowledged before me this 25 day of November, 1998, by Michael B. Davis who is personally known to me or has produced as identification, and who did take an oath.

Denise J. Gish
Printed/Typed Name: Denise J. Gish
Notary Public-State of Florida
Commission Number:



DENISE J GISH
My Commission CC561732
Expires Apr 30, 2000