**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.

(((H11000256488 3)))



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)617-6383

From:

Account Name : TRIPP SCOTT, P.A.

Account Number : 075350000065

Phone : (954)525-7500

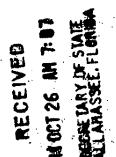
Fax Number

: (954)761-8475

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

Email	Address:			

#### Foreign Limited Liability Company Fa La Me Charters, LLC



Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$155.00

A. LUNT

OCT 27 2011

**EXAMINER** 

Electronic Filing Menu

Corporate Filing Menu

Help

H11000256488

## APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BY SINESS IN THE STATE OF FLORIDA.

1. FA LA ME CHARTERS, LLC  (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or	·"LLC.")	<u> </u>	
(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach consent of the managers or managing members adopting the alternate name. The alternate name must include "Company," "L.L.C," "LLC.")			
2. DELAWARE 3. 45-3659964			
(Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized)	No.	2	
4. OCTOBER 20, 2011 5. PERPETUAL		0	
(Date of Organization) (Duration: Year limited liability company exist or "perpetual")	will ceas		
6. 11/2011	150 150 150 150 150 150 150 150 150 150	み	1
(Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)	<u> </u>	7	Ĭ
9001 E. COLONIAL DRIVE	STA.	ထု	(
ORLANDO, FL 32817	Şm.	<b>©</b> 1	
(Street Address of Principal Office)			
8. If limited liability company is a manager-managed company, check here			
9. The name and usual business addresses of the managing members or managers are as follows:			
FRANK J. RODRIGUEZ, 9001 E. COLONIAL DRIVE, ORLANDO, FL 3281	7		
من المنافعة على ال			do im
10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign.)	n languag	orieccie ₃e,a	וווכוב
translation of the certificate under eath of the translator must be submitted.)			
11. Nature of business or purposes to be conducted or promoted in Florida: TO OWN AND OPERATE A SP	ORT FISHING	YACHT,	
AND TO CHARTER SUCH YACHT FOR HIRE TO ELIGIBLE CUSTOMERS, AND ANY OTHER LAWFUL BUSINESS ACTIVITIES AS MAY BE DETERMINED BY THE MEMBER	FROM TIME TO	O TIME.	
1866			
Signature of a member or an authorized representative of a member.			
(In accordance with section 608.408(3), F.S., the execution of this document constitutes an affirmation unpenalties of perjury that the facts stated herein are true. I am aware that any false information submit document to the Department of State constitutes a third degree felony as provided for in s.817  GREGORY A. McLAUGHLIN, AUTHORIZED REPRESENTATIVE	itted in a	.)	
Typed or printed name of signee			
$HII \alpha                                  $	4488	*	

H11000256488

## CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

FA LA M	ME CHARTERS, LLC	<del></del>	
If unavailable,	the alternate to be used in the state of Florida is:		
2. The name a	nd the Florida street address of the registered agent and office are:	ZOLI SESTALIA	
.•	IJ QCT 26	1	
	TRIPP SCOTT, P.A, 110 SE 6th ST., 15th FLOOR Florida Street Address (P.O. Box NOT ACCEPTABLE)	TO S	
	FORT LAUDERDALE FL 33301	82 89 TATE ORIDA	<b>:</b>

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 608, Florida Statutes.

(Signature)

\$ 100.00 Filing Fee for Application

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (optional)

\$ 5.00 Certificate of Status (optional)

H11000256488

# Delaware

H11000256488

PAGE I

### The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREBY CERTIFY "FA LA ME CHARTERS, LLC" IS DULY
FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD
STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS
OFFICE SHOW, AS OF THE TWENTY-FIFTH DAY OF OCTOBER, A.D. 2011.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE NOT BEEN ASSESSED TO DATE.

5054690 8300

111132249

You may verify this certificate coline at corp. delaware.gov/authver.shtml

jeffrey W. Bullock, Secretary of State

UTHENTICATION: 9113247

DATE: 10-25-11

H11000256488