

M17000010717

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

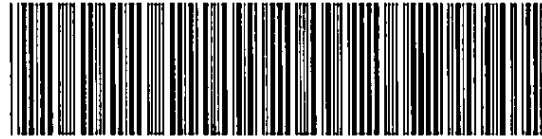
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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11/28/17--01007--032 **160.00

2017 DEC 13 11:40:39

DEC 19 2017
J. HARRIS

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: SHORELINE MARINE LLC
Name of Limited Liability Company

The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida.

Please return all correspondence concerning this matter to the following:

STEPHEN BOUDREAU
Name of Person

SHORELINE MARINE LLC
Firm/Company

1107 KEY PLAZA #289
Address

KEY WEST, FL. 33040-4077
City/State and Zip Code

shorelinemail@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

STEPHEN BOUDREAU at (985) 966-0989
Name of Contact Person Area Code Daytime Telephone Number

MAILING ADDRESS:

Division of Corporations
Registration Section
P.O. Box 6327
Tallahassee, FL 32314

STREET ADDRESS:

Division of Corporations
Registration Section
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Enclosed is a check for the following amount:

☐ \$125.00 Filing Fee ☐ \$130.00 Filing Fee & Certificate of Status ☐ \$155.00 Filing Fee & Certified Copy ☒ \$160.00 Filing Fee, Certificate of Status & Certified Copy



FLORIDA DEPARTMENT OF STATE
Division of Corporations

November 29, 2017

STEPHEN BOUDREAUX
1107 KEY PLAZA #289
KEY WEST, FL 33040-4077

SUBJECT: SHORELINE MARINE LLC
Ref. Number: W17000094753

2017 DEC 19 AM 10:24
FBI/DOJ/SECURITY

We have received your document for SHORELINE MARINE LLC and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of your limited liability company is not available in the state of Florida since it is the same as, or it is not distinguishable from the name of an existing entity on our records. Therefore, the limited liability company must select an alternate name for use in the state of Florida.

Please insert the alternate name in the space provided on the application form.

The alternate name must contain the words "Limited Liability Company," the abbreviation "L.L.C.," or the designation "LLC." The following suffixes are no longer acceptable: "Limited Company," "L.C.," and "LC". The abbreviations "Ltd." and "Co.," also are no longer acceptable.

The document number of the name conflict is P14000070309.

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) 245-6051.

Jenna D Harris
Regulatory Specialist II

Letter Number: 317A00024110

2017 DEC 19 10:40:33

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

IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY
COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. SHORELINE MARINE LLC
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")
SHORELINE CONSTRUCTION SERVICES LLC
(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Liability Company," "L.L.C.," or "LLC.")
2. STATE OF LOUISIANA 3. 27-4740200
(Jurisdiction under the law of which foreign limited liability company is organized) (FBI number, if applicable)
4. NONE
(Date first transacted business in Florida, if prior to registration)
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)
5. 22015 NOZAN ROAD 6. 1107 KEY PLAZA #289
(Street Address of Principal Office) (Mailing Address)
CONVINGTON, LA. 70435- KEY WEST, FL.
6401 33040-4077

7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name:

DAN F. SCHRAMM

Office Address:

C23 9TH AVENUE

KEY WEST

, Florida 33040

(City)

(Zip code)

Registered agent's acceptance:

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 application, 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 relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

[Signature]
(Registered agent's signature)

8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:

Title or Capacity:

Name and Address:

Title or Capacity:

Name and Address:

PRESIDENT

STEPHEN BOUDREAU
22015 NOZAN ROAD
CONVINGTON, LA. 70435

(Use attachments if necessary)

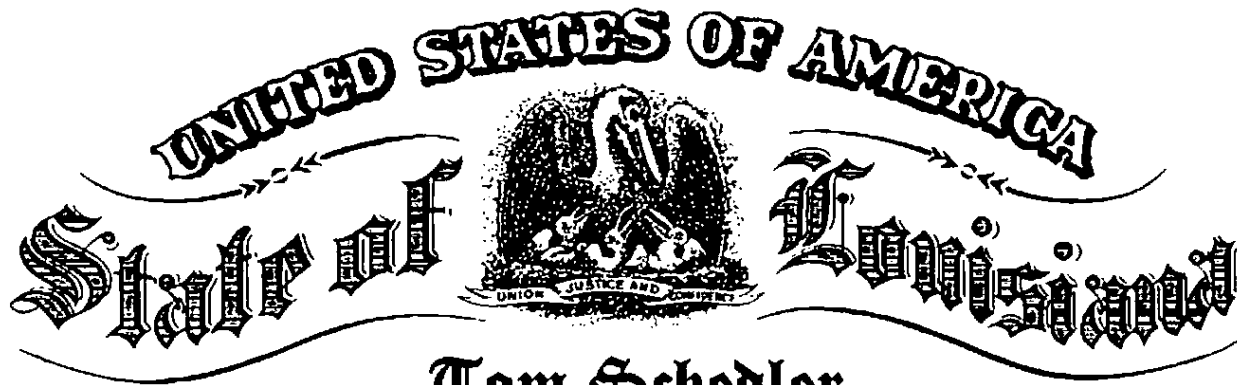
9. Attached is a certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted)

10. 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.

Stephen Boudreau
Signature of an authorized person

STEPHEN BOUDREAU

Typed or printed name of signer



Tom Schedler
SECRETARY OF STATE

As Secretary of State of the State of Louisiana, I do hereby Certify that

the Articles of Organization of

SHORELINE MARINE LLC

Domiciled at COVINGTON, LOUISIANA,

Were filed in this Office and a Certificate of Organization was issued on February 02, 2011,

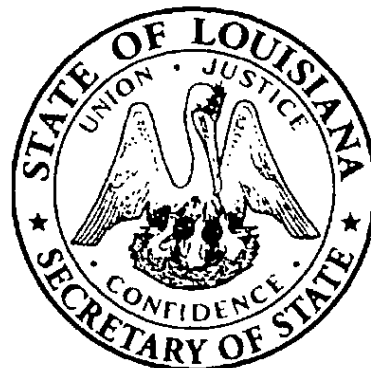
I further certify that no Certificate of Dissolution or Termination has been issued.

In testimony whereof, I have hereunto set my hand and caused the Seal of my Office to be affixed at the City of Baton Rouge on,

November 8, 2017

Secretary of State

Web 40418289K



Certificate ID: 10887029#T9R93

To validate this certificate, visit the following web site, go to **Business Services, Search for Louisiana Business Filings, Validate a Certificate**, then follow the instructions displayed.
www.sos.la.gov