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AUG 27 2021

M. SOLOMON

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: ACF CHARTERS, 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:

MATTHEW MILLER

Name of Person

MILLER LAW PLLC

Firm/Company

222 US HWY 1, STE 211

Address

TEQUESTA, FL 33469

City/State and Zip Code

matt.miller@yachtingattorney.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

MATTHEW MILLER

561

316-2032

at ()

Name of Contact Person

Area Code

Daytime Telephone Number

Mailing Address:

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

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Enclosed is a check for the following amount:

Please make check payable to: **FLORIDA DEPARTMENT OF STATE**

☒ \$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

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. ACF CHARTERS, LLC
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "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. DELAWARE 3. 86-3443175
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)

4. N/A
(Date first transacted business in Florida, if prior to registration)
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. 6581 SE HARBOR CIRCLE 6. 6581 SE HARBOR CIRCLE
(Street Address of Principal Office) (Mailing Address)

STUART, FL 34996 STUART, FL 34996

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

Name: MILLER LAW PLLC
Office Address: 222 US HWY 1, STE 211
TEQUESTA, Florida 33469
(City) (Zip code)

2021 AUG 27 PM 12:38
CLERK OF STATE
J. E. U.

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. For initial indexing purposes, list names, title or capacity and addresses of the primary members/managers or persons authorized to manage [up to six (6) total]:

<u>Title or Capacity:</u>	<u>Name and Address:</u>	<u>Title or Capacity:</u>	<u>Name and Address:</u>
<input checked="" type="checkbox"/> Manager	Name: RICHARD CRANDALL	<input type="checkbox"/> Manager	Name: _____
<input type="checkbox"/> Member	Address: 6581 SE HARBOR CIRCLE	<input type="checkbox"/> Member	Address: _____
<input type="checkbox"/> Authorized	STUART, FL 34996	<input type="checkbox"/> Authorized	_____
Person	_____	Person	_____
<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____
<input type="checkbox"/> Manager	Name: _____	<input type="checkbox"/> Manager	Name: _____
<input type="checkbox"/> Member	Address: _____	<input type="checkbox"/> Member	Address: _____
<input type="checkbox"/> Authorized	_____	<input type="checkbox"/> Authorized	_____
Person	_____	Person	_____
<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____
<input type="checkbox"/> Manager	Name: _____	<input type="checkbox"/> Manager	Name: _____
<input type="checkbox"/> Member	Address: _____	<input type="checkbox"/> Member	Address: _____
<input type="checkbox"/> Authorized	_____	<input type="checkbox"/> Authorized	_____
Person	_____	Person	_____
<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____	<input type="checkbox"/> Other _____

Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed individuals may be added to the index when filing your Florida Department of State Annual Report form.

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.



Signature of an authorized person

MATTHEW MILLER

Typed or printed name of signer

FILED
2021 AUG 27 PM 12:38
CLERK OF DISTRICT COURT
JACKSONVILLE, FLORIDA

CERTIFICATE OF FORMATION
OF

ACF CHARTERS, LLC

The undersigned authorized person, desiring to form a limited liability company in accordance with the Limited Liability Company Act of the State of Delaware, hereby certifies as follows:

1. The name of the limited liability company is: ACF Charters, LLC.
2. The address of the Registered Office of the limited liability company in the State of Delaware is located at 919 North Market Street, Suite 950 in the city of Wilmington, County of New Castle, Delaware 19801. The name of the Registered Agent at such address upon whom process against this limited liability company may be served is InCorp Services, Inc.
3. The term and duration of this limited liability company is perpetual from the date of filing this certificate with the Secretary of State of Delaware.

IN WITNESS WHEREOF, the undersigned has executed this Certificate of Formation of ACF Charters, LLC on this 12th day of April, 2021.



Matthew D. Miller
Miller Law, PLLC
222 US Hwy 1, Ste. 211
Tequesta, FL 33469

State Of Delaware

Entity Details

5/24/2021 3:16:49PM

File Number: 5836667

Incorporation Date / Formation Date: 4/13/2021

Entity Name: ACF CHARTERS, LLC

Entity Kind: Limited Liability Company

Entity Type: General

Residency: Domestic

State: DELAWARE

Status: Good Standing

Status Date: 4/13/2021

Registered Agent Information

Name: INCORP SERVICES, INC.

Address: 919 NORTH MARKET STREET, SUITE 950

City: WILMINGTON

Country:

State: DE

Postal Code: 19801

Phone: 800-246-2677

Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "ACF 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 NINETEENTH DAY OF JULY, A.D. 2021.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "ACF CHARTERS, LLC" WAS FORMED ON THE THIRTEENTH DAY OF APRIL, A.D. 2021.



5836667 8300

SR# 20212498446

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

A handwritten signature in black ink, appearing to read "JBULLOCK", is written over a horizontal line. Below the line, the text "Jeffrey W. Bullock, Secretary of State" is printed in a small font.

Authentication: 203708380

Date: 07-19-21



FLORIDA DEPARTMENT OF STATE
Division of Corporations

June 15, 2021

MATTHEW MILLER
MILLER LAW PLLC
222 US HWY 1, STE 211
TEQUESTA, FL 33469

SUBJECT: ACF CHARTERS, LLC
Ref. Number: W21000087203

We have received your document for ACF CHARTERS, LLC and check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Mel Solomon
Senior Section Administrator

Letter Number: 621A00013344

*Rec'd
8-27-21*