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COVER LETTER

TO:

BJECT:	Great Loop Yacht Sales, LLC.		
ober.	Namo	e of Limited Liability Company	
		Company for Authorization to Transact Business in Florida," Certifi referenced foreign limited liability company to transact business in F	
se return	all correspondence concerning this matter to	o the following:	
	Michael K Martin		
		Name of Person	
	Great Loop Yacht Sales , LLC.	Firm/Company R 1	
		Firm/Company - PR	
	5911 Steward St Unit 16	- n 1	
		Address	
	Hanahan, SC 29410	Address 2: 04	
	C	ity/State and Zip Code	
	Michael@greatloopyachtsales.com		
	E-mail address: (to be	used for future annual report notification)	
further i	nformation concerning this matter, please cal	II:	
Mi	chael K Martin	440 781-8201 at ()	
	Name of Contact Person	Area Code Daytime Telephone Number	
	iling Address:	Street Address:	
	gistration Section	Registration Section	
	vision of Corporations	Division of Corporations	
	D. Box 6327	The Centre of Tallahassee	
Ta	llahassee, FL 32314	2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303	
	closed is a check for the following amount:	DA BTARPNT ZIF CTATE	
	ase make check payable to: FLORIDA DEP \$125.00 Filing Fee \$\Bigsim \$130.00 Filing Fe Certificate o	e & 🔲 \$155.00 Filing Fee & 🖂 \$160.00 Filing Fee, Certific	

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: Great Loop Yacht Sales, 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 "L.C.") State of South Carolina 92-2820545 (Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable) N/A (Date first transacted business in Florida, if prior to registration.) (See sections 605.0904 & 605.0905, F.S. to determine penalty liability) 5911 Steward St Unit 16 5911 Steward St Unit 16 (Mailing Address) (Street Address of Principal Office) Hanahan, SC 29410 7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Michael K Martin Name: 1350 Monroe Street #1273 Office Address: Fort Myers 33902 Florida (City) 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.

Michael K Martin
(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]: Title or Capacity: Name and Address: Title or Capacity: Name and Address: Michael K Martin Brent W Bowlin Name: Name: ■ Manager ■ Manager 5911 Steward St Unit 16 1350 Monroe Street #1273 ■ Member ■ Member Address: Hanahan, SC 29410 Fort Myers, FL 33902 **■**Authorized **■**Authorized Person Person □Other Other □Other Other □Manager □Manager Name: Name: □Member Address: □Member Address: □ Authorized □ Authorized Person Person Other____ □Other □Other____ □Other__ □Manager Name: Name: ____ Manager □Member Address: Address: □ Authorized □ Authorized Person Person □Other___ Other____ □Other Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Nonindexed 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.

Michael K Martin

Michael K Martin

Signature of an authorized person

Typed or printed name of signee

The State of South Carolina



Office of Secretary of State Mark Hammond

Certificate of Existence

I, Mark Hammond, Secretary of State of South Carolina Hereby Certify that:

Great Loop Yacht Sales LLC, a limited liability company duly organized under the laws of the State of South Carolina on March 7th, 2023, with a duration that its at will, has as of this date filed all reports due this office, paid all fees, taxes and penalties owed to the State, that the Secretary of State has not mailed notice to the company that it is subject to being dissolved by administrative action pursuant to S.C. Code Ann. §33-44-809, and that the company has not filed articles of termination as of the date hereof.

Given under my Hand and the Great Seal of the State of South Carolina this 11th day of April, 2023.

Mark Hammond, Secretary of State