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To:

Division of Corporations

Fax Number

: (850)617-6381

From:

Account Name : LAW OFFICE OF CONRAD WILLKOMM, P.A.

Account Number : 120200000174 Phone : (239)262-5303 Fax Number : (239)262-6030

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: Conrad@swfloridalaw.com

FLORIDA LIMITED LIABILITY CO.

Ayacht, LLC

Certificate of Status	1
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Page Count	03
Estimated Charge	\$160.00

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	P.O. Box	X 6327	Clifton Building	nter Circle	

352 Harbour Drive 352 Harbour Drive Naples, Florida 34103 Naples, Florida 34103

Mailing Address

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

The name and the Florida street address of the registered agent are:

Principal Office Address:

Name

3201 Tamiami Trail N, 2nd Floor
Florida street address (P.O. Box NOT acceptable)

Naples Florida 34103

City State Zip

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 positive as registered agent as provided for in Chapter 605, F.S..

Registered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

ARTICLE IV- The name and address of e Title: "AMBR" = Authorized Me "MGR" = Manager MGR	ember	manage and control the Lim	nited Liability Company:	H2200001
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