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.

(((H24000119244 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)617-6381

From:

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081 Phone : (307)200-2803 Fax Number : (813)436-5206

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

Email Address:_____

FLORIDA LIMITED LIABILITY CO.

SimplyBoat LLC

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$125.00

Electronic Filing Menu Corporate Filing Menu

Help

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 - Name:

The name of the Limited Liability Company is:

SimplyBoat LLC

(Must contain the words "Limited Liability Company, "L.L.C.," or "LLC.")

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

<u>Principal (</u>	Office Address:	<u>Mai</u>	iling Address:
7901 4th St N		7901 4th St N	
STE 300		STE 300	
St. Petershurg	FL 33702	St. Petersburg	FL 33702

ARTICLE III - Registered Ag (The Limited Liability Company another business entity with an	cannot serve as its own	Registered Ag	Agent's Signature: cent. You must designate an	<u>_</u> ,
The name and the Florida street	address of the registered	l agent are:		AHAŠSE
	Northwest Registered	l Agent LLC		SEE.
	 	Name	•	. ந் ந்
	7901 4th St N		STE 300	다. 유:
	Florida street address	s (P.O. Box No	OT acceptable)	ÖRİDA
	St. Petersburg	FL	33702	
	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 position as registered agent as provided for in Chapter 605, F.S.,

Registered Agent's Signature (REQUIRED)

(CONTINUED)

Title:	Name and Address:
"AMBR" = Authorized Member "MGR" = Manager	
AMBR	Besnik Sylaj
	7901 4th St N STE 300
	St. Petersburg, EL 33702
	Ndricim Xhemajli
AMBR	7901 4th St N STE 300
	St. Petersburg, FL 33702
(Use attachment if necessary)	
·	
RTICLE V: Effective date, if other than the date	e of filing:
RTICLE V: Effective date, if other than the date fan effective date is listed, the date must be sp	e of filing:
RTICLE V: Effective date, if other than the date an effective date is listed, the date must be speedate of filing.)	pecific and cannot be more than five business days prior to or 90 days after
RTICLE V: Effective date, if other than the date f an effective date is listed, the date must be specified of filing.) ote: If the date inserted in this block does not	meet the applicable statutory filing requirements, this date will not be listed
RTICLE V: Effective date, if other than the date an effective date is listed, the date must be specified of filing.) ote: If the date inserted in this block does not be document's effective date on the Department	meet the applicable statutory filing requirements, this date will not be listed
RTICLE V: Effective date, if other than the date an effective date is listed, the date must be specified of filing.) nte: If the date inserted in this block does not be document's effective date on the Department RTICLE VI: Other provisions, if any.	meet the applicable statutory filing requirements, this date will not be listed
RTICLE V: Effective date, if other than the date f an effective date is listed, the date must be specified of filing.) ote: If the date inserted in this block does not be document's effective date on the Department RTICLE VI: Other provisions, if any.	meet the applicable statutory filing requirements, this date will not be listed
RTICLE V: Effective date, if other than the date f an effective date is listed, the date must be speciate of filing.) ote: If the date inserted in this block does not be document's effective date on the Department RTICLE VI: Other provisions, if any.	meet the applicable statutory filing requirements, this date will not be listed
RTICLE V: Effective date, if other than the date f an effective date is listed, the date must be speciate of filing.) ote: If the date inserted in this block does not be document's effective date on the Department RTICLE VI: Other provisions, if any.	meet the applicable statutory filing requirements, this date will not be listed
RTICLE V: Effective date, if other than the date an effective date is listed, the date must be specified of filing.) ote: If the date inserted in this block does not be document's effective date on the Department RTICLE VI: Other provisions, if any, see additional page)	meet the applicable statutory filing requirements, this date will not be listed
RTICLE V: Effective date, if other than the date an effective date is listed, the date must be special date of filing.) ote: If the date inserted in this block does not be document's effective date on the Department effective date on the Department eadditional page) REOURED SIGNATURE:	meetific and cannot be more than five business days prior to or 90 days after meet the applicable statutory filing requirements, this date will not be listed to f State's records.
RTICLE V: Effective date, if other than the date an effective date is listed, the date must be specially determined in this block does not be document's effective date on the Department RTICLE VI: Other provisions, if any, see additional page) REQUIRED SIGNATURE:	meet the applicable statutory filing requirements, this date will not be listed to of State's records.
RTICLE V: Effective date, if other than the date an effective date is listed, the date must be specified of filing.) ote: If the date inserted in this block does not be document's effective date on the Department effective date on the Department en additional page) REOUIRED SIGNATURE: Signature of a m	meet the applicable statutory filing requirements, this date will not be listed to of State's records. WMA member or an authorized representative of a member.
RTICLE V: Effective date, if other than the date frame effective date is listed, the date must be specified of filing.) Note: If the date inserted in this block does not the document's effective date on the Department effective date on the Department effective additional page) REQUIRED SIGNATURE: Signature of a mathematical effective document is executed.	meet the applicable statutory filing requirements, this date will not be list of State's records.

Filing Fees:

Typed or printed name of signee

Smith

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)

Nat

4/1/2024 09:19:50 PDT . To: 18506176381 Page. 4/4 Fax: 8134365206

The purpose of this organization includes, but is not limited to, the operation of a digital marketplace for boat rentals. This encompasses facilitating the listing and leasing of boats by their owners to third parties, providing a platform for transactions and communications between boat owners and renters, and offering related services to enhance the boating rental experience. The company may also engage in marketing, advertising, and promotion of boat rental listings, as well as the development and maintenance of related software and technologies. Additionally, the company may provide consultancy and management services in the field of recreational boating, and undertake any other lawful activities incidental to the foregoing or conducive to the attainment of the company's objectives.

1-11 EU
2024 APR -1 PM 2: 56