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Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850) 617-6383

From:

Account Name : EMPIRE CORPORATE KIT COMPANY
Account Number : 072450003255
Phone : (305) 634-3694
Fax Number : (305) 633-9696

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FLORIDA/FOREIGN LIMITED LIABILITY CO.

hammertime sailing, llc

Certificate of Status	0
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TALLAHASSEE, FLORIDA

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T. HAMPTON

AUG 15 2008

EXAMINER

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

HAMMERTIME SAILING, LLC

(Must end with the words "Limited Liability Company," "Limited Company" or their abbreviation "LLC," or "L.C.")

ARTICLE II - Address:

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

Principal Office Address:

4490 PLAYER ST
HOLLYWOOD, FLORIDA
33021

Mailing Address:

SAME

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:

MARC HAMMERMAN

Name

4490 PLAYER ST

Florida street address (P.O. Box NOT acceptable)

HOLLYWOOD FL 33021

City, State, and 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 608, F.S.

Marc Hammerman
Registered Agent's Signature (REQUIRED)

(CONTINUED)

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ARTICLE IV- Manager(s) or Managing Member(s):
The name and address of each Manager or Managing Member is as follows:

Title:

"MGR" = Manager

"MGRM" = Managing Member

Name and Address:

MGR

MARC HAMMERMAN
4440 PLAYER ST
HOLLYWOOD, FLORIDA 33021

MGRM

VIVIAN HAMMERMAN
4440 PLAYER ST
HOLLYWOOD, FLORIDA 33021

MGRM

ELYSHA SHAINBERG
4080 NORTH 41 ST ST
HOLLYWOOD, FLORIDA 33021

MGRM

BARRY HAMMERMAN
12 LAKEVIEW DRIVE
WEST ORANGE, NEW JERSEY 07052

(Use attachment if necessary) SEE ATTACHMENT

ARTICLE V: Effective date, if other than the date of filing: _____ (OPTIONAL)
(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

REQUIRED SIGNATURE:

Marc Hammerman
Signature of a member or an authorized representative of a member.

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

MARC HAMMERMAN
Typed or printed name of signer

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MGRM

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JASON HAMMERMAN
4490 PLAYER ST
HOLLYWOOD FLORIDA 33021

MGRM

ESTHER HAMMERMAN
4490 PLAYER ST
HOLLYWOOD, FLORIDA 33021

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