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(Requestor's Name)

(Address)

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(City/State/Zip/Phone #)

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Certified Copies _____ Certificates of Status _____

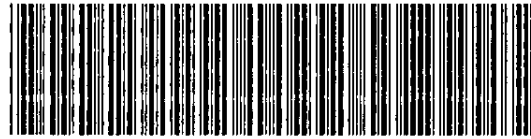
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SECRETARY OF STATE
DIVISION OF CORPORATIONS
11 MAR 21 AM 11:08

K. RAY PINKSTAFF, P.C.,

ATTORNEYS AT LAW

FIVE HANNA PLACE OFFICE PARK, SUITE 6000

PO Box 31408

KNOXVILLE, TENNESSEE 37930-1408

FACSIMILE (865) 690-7806

K. RAY PINKSTAFF

March 11, 2011

Registration Section
Division of Corporations
PO Box 6327
Tallahassee FL 32314

**RE: STARBOARD FLORIDA IV, LLC
STARBOARD FLORIDA V, LLC
STARBOARD FLORIDA VI, LLC**

Dear Sir:

Enclosed please find the Articles of Organization for the above-referenced limited liability companies. Please accept this document for filing and return the approved Articles to me at your earliest convenience to the address listed above. Also enclosed are checks in the amount of \$130 each for the filing fee.

Please feel free to contact me if you have any questions. Thank you for your assistance in this matter.

Sincerely yours,



K. Ray Pinkstaff

KRP/ndw
Enclosures

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WRITER'S DIRECT DIAL
(865) 690-430

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Starboard Florida VI, LLC
Name of Limited Liability Company

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The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

K. Ray Pinkstaff
Name of Person

K. Ray Pinkstaff, PC
Firm/Company

PO Box 31408
Address

Knoxville, TN 37930
City/State and Zip Code

ray@pinkstafflaw.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Ray Pinkstaff at (**865**) **690-7010**
Name of Person Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

- \$125.00 Filing Fee
- \$130.00 Filing Fee & Certificate of Status
- \$155.00 Filing Fee & Certified Copy (additional copy is enclosed)
- \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

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

Street/Courier Address
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Starboard Florida VI, LLC

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

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ARTICLE II - Address:

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

Principal Office Address:

400 Alton Road, 3104
Miami Beach, FL 33139

Mailing Address:

PO Box 31408
Knoxville, TN 37930

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:

John M. Jansheski
Name

400 Alton Road, 3104
Florida street address (P.O. Box **NOT** acceptable)
Miami Beach FL 33139
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..



Registered Agent's Signature (REQUIRED)

(CONTINUED)

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


John M. Jansheski
400 Alton Road, 3104
Miami Beach, FL 33139

(Use attachment if necessary)

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:



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. 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.)

John M. Jansheski

Typed or printed name of signee

Filing Fees:

- \$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent**
- \$ 30.00 Certified Copy (Optional)**
- \$ 5.00 Certificate of Status (Optional)**