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Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	





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FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

September 21, 2004

DONALD D. MULL JR. 18435 GOODMAN CIRCLE PORT CHARLOTTE, FL 33948

SUBJECT: THE ART OF FISHING & MARINE SALVAGE LLC

Ref. Number: W04000035006

We have received your document for THE ART OF FISHING & MARINE SALVAGE LLC and your check(s) totaling \$100.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The fees to file a Florida Limited Liability Company or register a Foreign Limited Liability Company are as follows: \$100 filing fee; and \$25 registered agent designation fee. Please include an additional \$30 for each certified copy requested (optional) and \$5.00 for each certificate of status requested (optional).

A business entity may not serve as its own registered agent. Please designate an individual or another business entity with an active registration or filing with this office, having a Florida street address identical with that of the registered office.

Please return your document, along with a copy of this letter, within 60 days your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please cal (850) 245-6020.

Tammi Cline Document Specialist

Letter Number: 204A00055639

Cover Letter For LLC

Capt. Donald D. Mullfr. 18435 Goodman Cir. Port Charlotte FL. 33948 Fax, 941,255,0715 Phone, 941.628,5860

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SECH-WAY OF STATE
TALLAHASSEE, FLORIDA

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the Limited Liability Company is:	mania Cal
The Art of Fishing +1	MAINE SALVASE LL
ARTICLE II - Address: The mailing address and street address of the princ	ipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
18435 6000 MAN CIR	SAME
Port Charb HeFI	1
33948	
ARTICLE III - Registered Agent, Registered O	ffice, & Registered Agent's Signature:
The name and the Form	
- CAPT. HONK	Ald D. Mill JAR 10 C
Name	4 + 00 × 00 × 00 × 00 × 00 × 00 × 00 × 0
18435 6000	IMAN CIR EST I
Florida street address (P.O. B.	
Voct Churcht	FLORIDA 33948 OFFICE STATES
City, State, and	zip 受品 企

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, Florida Statutes.

Registered Agent's Signature

Page 1 of 2 (CONTINUED)

ARTICLE IV. Manager(s) or Manager and address of each Manager	aging Member(s): er or Managing Member is as follows:		
<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:		
MRG MRG	CAPT. DONALD. M. 18435-GOODMAN CIR POST CHALLOTTEFI 33948	<u> </u>	
	18435-6000 MAN CIA Port Charlotte F133	- - 948-	
		-	
(Use attachment if necessary)			
NOTE: An additional article must be	e added if an effective date is requested.		
REQUIRED SIGNATURE:	Muly		
Signature of a member or an	authorized representative of a member.	, ZS	2
(In accordance with section 60s of this document constitutes an that the facts stated herein are to	8.408(3), Florida Statutes, the execution affirmation under the penalties of perjury rue.)	Conc. JAH	0CT - I
(APt, /)on A/c Typed or p	L DOAN M// VK, rinted name of signee		77 1390

Filing Fees:
\$100.00 Filing Fee for Articles of Organization
\$ 25.00 Designation of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)