

L04000073813

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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Special Instructions to Filing Officer:

W04-34308 2827 535

Office Use Only



700040403777

09/03/04--01040--012 **100.00

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10/11/04--01003--020 **50.00

FILED
RECEIVED
04 OCT 11 AM 9:09

Mr. Merrick,

*Can you please do an address change for TG Custom
Marine, LLC (Fishphone Communications, LLC)?*

The new address is:

Thomas R. Gardi

2100 Via Royale

Apt. # 2111

Jupiter, FL 33458

*If we need to do an address change with another department
please let us know. Thank you so much for your time and
assistance.*

*Tom Gardi
10/5/04*

04 OCT 11 AM 9:09
DIVISION OF CORRECTIONS
OFFICE OF THE WARDEN



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood
Secretary of State

September 15, 2004

THOMAS R. GARDI
49 UNO LAGO DRIVE
JUNO BEACH, FL 33408

SUBJECT: TG CUSTOM MARINE, LLC
Ref. Number: W04000034308

We have received your document for TG CUSTOM MARINE, LLC and your check(s) totaling \$100.00. However, the document has not been filed and is being retained in this office for the following:

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).

There is a fee of \$50.00 due.

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

If you have any questions concerning the filing of your document, please call (850) 245-6890.

Jason Merrick
Document Specialist

Letter Number: 804A00054783

04 OCT 11 AM 9:09

DIVISION OF CORPORATIONS

**ARTICLES OF ORGANIZATION
FOR
FLORIDA LIMITED LIABILITY COMPANY**

ARTICLE I - Name:

The name of the Limited Liability Company is:

TG CUSTOM MARINE, LLC

ARTICLE II - Address:

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

Principal Office Address:

49 UNO LAGO DRIVE

JUNO BEACH, FL 33408

Mailing Address:

49 UNO LAGO DRIVE

JUNO BEACH, FL 33408

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

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

THOMAS R. GARDI

Name

49 UNO LAGO DRIVE

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

JUNO BEACH

FLORIDA 33408

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, Florida Statutes.



Registered Agent's Signature

04 OCT 11
DIVISION OF CORPORATE & FINANCIAL SERVICES
STATE OF FLORIDA

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:

MGRM

THOMAS R. GARDI
49 UNO LAGO DRIVE
JUNO BEACH, FL 33408

MEMBER

MARY BALLARD GARDI
49 UNO LAGO DRIVE
JUNO BEACH, FL 33408

(Use attachment if necessary)

NOTE: An additional article must be added if an effective date is requested.

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.)

THOMAS R. GARDI

Typed or printed name of signee

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)

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SECRETARY OF STATE
DIVISION OF CORPORATE & BUSINESS REGISTRATION

CERTIFICATE OF CONVERSION

Pursuant to section 608.439, Florida Statutes, the following unincorporated business entity hereby submits the attached articles of organization and this certificate of conversion to convert to a Florida limited liability company:


FIRST: The name of the unincorporated business immediately prior to filing this document was:
FISHPHONE COMMUNICATIONS, LLC

SECOND: The date on which and the jurisdiction in which the unincorporated business was first created or otherwise came into being are:

- A. Date: 05/21/2003
- B. Jurisdiction: FLORIDA
- C. If different from the above noted jurisdiction, the jurisdiction immediately prior to its conversion: KENTUCKY

THIRD: The name of the limited liability company as set forth in the attached articles of organization is:

TG CUSTOM MARINE, LLC


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.)

THOMAS R. GARDI

Typed or Printed Name of Signee

FILING FEES:

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

(Note: Section 608.439, F.S., does not provide for a corporation to convert to a limited liability company.)

04 OCT 11 AM 9:09

DIVISION OF CORPORATIONS

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: TG CUSTOM MARINE, LLC
(Name of Limited Liability Company)

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

Please return all correspondence concerning this matter to the following:

THOMAS R. GARDI
(Name of Person)

TG CUSTOM MARINE, LLC
(Firm/Company)

49 UNO LAGO DRIVE
(Address)

JUNO BEACH, FL 33408
(City/State and Zip Code)

For further information concerning this matter, please call:

THOMAS R. GARDI at (561) 313-1998
(Name of Person) (Area Code & Daytime Telephone Number)

STREET ADDRESS:
Registration Section
Division of Corporations
409 E. Gaines Street
Tallahassee, Florida 32399

MAILING ADDRESS:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

04 OCT 11 AM 9:09
DIVISION OF CORPORATIONS