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To:

Division of Corporations

Fax Number : (850) 205-0383

From:

Account Name : A 1 A CORPORATE SERVICES, INC.

Account Number : 120010000247 Phone : (800)494-3124 Fax Number : (305)675-2811

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LIMITED LIABILITY COMPANY

Oster Marine Mechanical Services, LLC

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$125.00

SECRETARY OF STATE

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ARTICLES OF ORGANIZATION FOR A FLORIDA LIMITED LIABILITY COMPANY

In compliance with Chapter 608, F.S.

ARTICLE I NAME

The name of the Limited Liability Company is:

OSTER MARINE MECHANICAL SERVICES, LLC

ARTICLE II ADDRESS

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

6 RED SNAPPER LANE PONTE VEDRA BEACH, FL 32082

ARTICLE III REGISTERED AGENT, REGISTERED OFFICE & REGISTERED AGENT SIGNATURE

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

JOHN C. OSTER 6 RED SNAPPER LANE PONTE VEDRA BEACH, FLORIDA 32082

Having been named as registered agent 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 allow statutes relating to the proper and complete performance of my duties, and I am familiar with accept the obligations of my position as registered agent as provided for in Chapter 608, F.S..

JOHN C. OSTER / Registered Agent's Signature

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ARTICLE IV MANAGEMENT

The Limited Liability Company is to be managed by one or more managers and is, therefore, a Manager Managed Company.

ARTICLE V

The name(s), address(es), and title(s) of the directors and officers:

Manager:

JOHN C. OSTER 6 RED SNAPPER LANE PONTE VEDRA BEACH, FLORIDA 32082

1.1

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.)

JOHN C. OSTER
Typed or printed name of signee

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SECRETARY OF STATE
TALLAHASSEE, FLORINA