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-	(Requestor's Name)
(	(Address)
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	(City/State/Zip/Phone #)
PICK-UP	WAIT MAIL
<u> </u>	(Business Entity Name)
	(Document Number)
Certified Copies	Certificates of Status
Special Instructions	to Filing Officer:
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## **COVER LETTER**

TO: Registration Section Division of Corporations				
SUBJECT: UNDERBERG	SHIPPING LINE	S, L.L.C.		
(	Name of Limited Liability C	ompany)		
The enclosed Articles of Organization	and fee(s) are submitted for	filing.		
Please return all correspondence conce	erning this matter to the folio	wing:		
Denise R. Undert	erg Golden			
	(Name of Perso	n)		
Underberg Shippi	ng Lines, L.L.C.			
	(Firm/Compan	y)		
4343 Swift Circle				
	(Address)	<del></del>		
Valrico, FL 3359				
	(City/State and Zip	Code)		
For further information concerning this	s matter, please call:			
Christopher A. Golden at (813 ) 298-3299				
(Name of Person)	(Area	a Code & Daytime Telephone	: Number)	
Enclosed is a check for the following	ng amount:			
\$125.00 Filing Eee \$130.00 Certificate	of Status Certified	Copy Certi copy is enclosed) Cert	160.00 Filing Fee, ifficate of Status & lifted Copy tional copy is enclosed)	
Mailing Ad Registration Division of P.O. Box-63 Tallahassee	Section Regi Corporations Divi 327 Clift FL 32314 266	et/Courier Address Istration Section Sion of Corporations Ion Building Executive Center Circle Inhance, FL 32301	18 P 3 15	

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

UNDERBERG SHIPPING LINES, L.L.C.

(Must end with the words "Limited Liability Compa	any, "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:	Mailing Address:	
4343 Swift Circle	4343 Swift Circle	
Valrico, FL	-Valrico, FL	
33594	33594	
The name and the Florida street address	s of the registered agent are:	
Christopher A. Go	<del></del>	
	Name	
4343 Swift Circle	9	
Florida	a street address (P.O. Box NOT acceptable)	
Valrico, FL 33594	.FL	
Ci	ty, State, and Zip	
Having heen named as registered agen	at and to accept service of process for the above stated limited	
	nated in this certificate, I hereby accept the appointment as	
	s capacity. I further agree to comply with the provisions of al	
	nplete performance of my duties, and I am familiar with and	
	n as registered agent as provided for in Chapter 608 F.S.	
Chust	Tools A. Molen 5	
Registered A ch	t's Signature (REQLURED)	

(CONTINUED) Page 1 of 2

## ARTICLE IV- Manager(s) or Managing Member(s): The name and address of each Manager or Managing Member is as follows: Title: Name and Address: "MGR" = Manager "MGRM" = Managing Member MGRM Denise R. Underberg Golden 4343 Swift Circle Valrico, FL 33594 MGR Christopher A. Golden 4343 Swift Circle Valrico, FL 33594 (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 expresentative 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

Typed or printed name of signee

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

that the facts stated herein are true.)

Denise R. Underberg Golden

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)