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DIVISION OF CORPORATIONS

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COVER LETTER

Division of Co				
SUBJECT: SEVE	N SEAS AQUATIO	OS LLC		
	(Name of Limite	d Liability Company)		
The enclosed Articles of	of Organization and fee(s) are s	ubmitted for filing.		
Please return all corresp	pondence concerning this matte	er to the following:		
JASON J	RACIOPPI			
	(Name of Person)		
SEVEN S	SEAS AQUATICS	LLC		
		(Firm/Company)		DIVI
4712 PE	MBROOKE LAN	IE .		2005 NOV
		(Address)		02°C
BONITA	SPRINGS, FL	34134		2005 NOV 23 PM 3: 10
	(City	/State and Zip Code)		8 ATIONS
For further information	concerning this matter, please	call:		TO 3
JASON J RAC	OPPI	at (239) 822-97		
(Name	of Person)	(Area Code & Daytime T	elephone Number)	
Enclosed is a check for	or 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 Fe Certificate of Status & Certified Copy (additional copy is enclose	È.
	Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street/Courier Addres Registration Section Division of Corporatio Clifton Building 2661 Executive Center Tallahassee, FL 32301	ns	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

(Must end with the words "Limited Liability Comp	any, "Limited Company" or their abbreviation "LLC," or "	ÍC.,")
ARTICLE II - Address:		
The mailing address and street address	of the principal office of the Limited Liabili	ty Company is:
Principal Office Address:	Mailing Address:	
17051 JEAN ST	4712 PEMBROOKE LANE	
FT MYERS, FL 33912	BONITA SPRINGS, FL 34134	
ARTICLE III - Registered Agent, R	egistered Office, & Registered Agent's Sigs own Registered Agent. You must designate an individual of	
ARTICLE III - Registered Agent, R (The Limited Liability Company cannot serve as its	egistered Office, & Registered Agent's Sig s own Registered Agent. You must designate an individual o	or another
ARTICLE III - Registered Agent, R (The Limited Liability Company cannot serve as its business entity with an active Florida registration.	egistered Office, & Registered Agent's Sigs own Registered Agent. You must designate an individual of the registered agent are:	or another
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ARTICLE III - Registered Agent, R (The Limited Liability Company cannot serve as its business entity with an active Florida registration. The name and the Florida street address JASON J RACIC 4712 PEMBRO	egistered Office, & Registered Agent's Sigs own Registered Agent. You must designate an individual of the registered agent are: OPPI Name	DIVISION OF CORPOR 2005 NOV 23 PM
ARTICLE III - Registered Agent, R (The Limited Liability Company cannot serve as its business entity with an active Florida registration. The name and the Florida street address JASON J RACIC 4712 PEMBRO	egistered Office, & Registered Agent's Sigs own Registered Agent. You must designate an individual of the registered agent are: OPPI Name OKE LANE a street address (P.O. Box NOT acceptable)	OF COR 2005 NOV 23

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 Signature (REQUIRED)

(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:

"MGRM" = Managing Mem MGR	JASON J RACIOPPI
	4712 PEMBROOKE LANE
	BONITA SPRINGS, FL 34134
MGRM	MARC ROSENBERG
	6143 PADORBURNE DR
	HUDSON, OH 44236
	HUDSON, OH 44236
(Use attachment if necessary)
LE V: Effective date, if other	r than the date of filing: (OPTIONA
	e must be specific and cannot be more than five business day
fective date is listed, the date days after the date of filing.) REQUIRED SIGNATURE)

that the facts stated herein are true.)

JASON J RACIOPPI

Typed or printed name of signee

of this document constitutes an affirmation under the penalties of perjury

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)