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| (Requ | uestor's Name) | |
|-----------------------------|-----------------|-------------|
| (Addr | ess) | |
| (Addr | ess) | |
| (City/: | State/Zip/Phone | e #) |
| PICK-UP | ☐ WAIT | MAIL |
| (Busin | ness Entity Nan | ne) |
| (Docu | ment Number) | |
| Certified Copies | Certificates | of Status |
| Special Instructions to Fil | ing Officer: | |
| | X | |

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ALLAHASSEE, FLORIDA

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CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301 (850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

| -1ª Marine | Services, SEC | OS OFF TO |
|---------------|----------------------------|---|
| | | Art of Inc. File LTD Partnership File Foreign Corp. File L.C. File Fictitious Name File Trade/Service Mark Merger File Art. of Amend. File RA Resignation Dissolution / Withdrawal Annual Report / Reinstatement Cert. Copy Photo Copy Certificate of Good Standing Certificate of Status Certificate of Fictitious Name Corp Record Search Officer Search |
| Signature | | Fictitious Search Fictitious Owner Search Vehicle Search |
| Requested by: | 13/3/05 11:30 Date Time | Driving Record UCC 1 or 3 File UCC 11 Search UCC 11 Retrieval |
| Walk-In | Will Pick Un | Courier |

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

| ARTICLE I - Name: |
|---|
| The name of the Limited Liability Company is: |
| H2 MARINE SERVICES, LLC |
| ARTICLE II - Address: |
| The mailing address and street address of the principal office of the Limited Liability Company is: H2 MARINE SERVICES (61) 51 BAHAMA AVE KEY LANGO 336 [MAILING) PO BOX 962 TAVELNIER FL 33070 TO ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: |
| The name and the Florida street address of the registered agent are: |
| |
| HEIDI SHUFF |
| Trains A - |
| 51 BAHAMA AVE |
| Florida strect address (P.O. Box NOT acceptable) |
| KEY LARGO FL 33037 City, State, and Zip |
| City, State, and Zip |
| 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's Signature |
| Article IV - Management (Check box if applicable.) The Limited Liability Company is to be managed by one manager or more managers and is, therefore, a manager - managed company. |
| (An additional article must be added if an effective date is requested) |
| 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.) |
| Typed or printed name of signee |

Filing Fees:

51.00.00 Filing Fee for Articles of Organization

\$ 25.00 Designation of Registered Agent \$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)