

W6000032839

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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**MICHAEL J. FERRIN**

*Board Certified Civil Trial Lawyer  
Supreme Court Certified Circuit Mediator*

823 North Olive Avenue  
West Palm Beach, Florida 33401  
www.laywers.com/mjferrin

Telephone (561) 683-4000  
Facsimile (561) 655-6044  
Florida Keys (305) 664-4044

March 23, 2006

Secretary of State  
Division of Corporations  
409 E. Gaines Street  
Tallahassee, Florida 32399

Re: SEAFERRIN, INC.

Dear Sir or Madam:

Enclosed please find the original and one copy of the executed Articles of Incorporation for the above-referenced corporation.

Also enclosed please find my check in the amount of \$125.00, representing payment of the filing fee.

Please file the Articles with the State and return a copy to the undersigned. Should you have any questions, please do not hesitate to contact me.

With kindest regards, I am

Sincerely,

  
Michael J. Ferrin

MJF/ac  
Enclosures

"SIGNED IN MR. FERRIN'S ABSENCE TO  
AVOID DELAY IN MAILING."

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MAR 20 11 43  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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

**ARTICLE I - Name:**

The name of the Limited Liability Company is:

SEA FERRIN, L.C.

**ARTICLE II - Address:**

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

**Principal Office Address:**

823 North Olive Avenue  
West Palm Beach, FL 33401

**Mailing Address:**

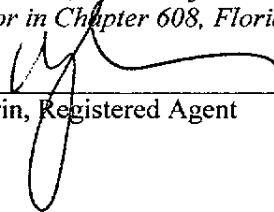
823 North Olive Avenue  
West Palm Beach, FL 33401

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

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

Michael J. Ferrin  
823 North Olive Avenue  
West Palm Beach, FL 33401

*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.*

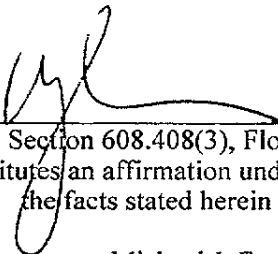
  
\_\_\_\_\_  
Michael J. Ferrin, Registered Agent

**ARTICLE IV - Managing Member:**

The name and address of each Manager or Managing Member is as follows: \_\_\_\_\_

Managing Member

Michael J. Ferrin  
823 North Olive Avenue  
West Palm Beach, FL 33401

  
\_\_\_\_\_  
(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.)

\_\_\_\_\_  
Michael J. Ferrin