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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

06 APR 17 PM 2:24

APPROVED  
AND  
FILED

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** MARINE WERKS LLC  
(Name of Limited Liability Company)

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

MICHAEL A. RODRIGUEZ

(Name of Person)

MARINE WERKS LLC

(Firm/Company)

9445 SW 36TH STREET

(Address)

MIAMI, FL 33165

(City/State and Zip Code)

For further information concerning this matter, please call:

MICHAEL A. RODRIGUEZ

(Name of Person)

at ( 305 ) 467 - 3336

(Area Code & Daytime Telephone Number)

Enclosed is a check for 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 Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

**Mailing Address**  
Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street/Courier Address**  
Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

## ARTICLE I

The name of this Florida Limited Liability Company shall be:

**MARINE WERKS LLC**

**EFFECTIVE DATE**  
**4/15/10**

## ARTICLE II

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

**Principal Office And Mailing Address:**

9445 SW 36<sup>TH</sup> STREET  
MIAMI, FL 33165

## ARTICLE III

**Registered Agent, Registered Office, & Registered Agent's Signature:**

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

ANNA M. PEREZ  
9445 SW 36<sup>TH</sup> STREET  
MIAMI, FL 33165

*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's Signature (REQUIRED)

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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AND  
FILED

## 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:**

MGRM

MICHAEL A. RODRIGUEZ  
9445 SW 36<sup>TH</sup> STREET  
MIAMI, FL 33165

MGRM

ANNA M. PEREZ  
9445 SW 36<sup>TH</sup> STREET  
MIAMI, FL 33165

## ARTICLE V

Effective date, if other than the date of filing:      APRIL 15, 2006

### REQUIRED SIGNATURE:



MICHAEL A. RODRIGUEZ

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.)

APPROVED  
AND  
FILED

06 APR 17 PM 2:24

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA