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(Requestor's Name)	-	
(Address)	-	
(Address)	-	
(City/State/Zip/Phone #)	-	
PICK-UP WAIT MAIL		
(Business Entity Name)	-	
(Document Number)	-	
Certified Copies Certificates of Status		
Special Instructions to Filing Officer:		
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16 MAY 15 PM 2:

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4 - 14 Pr - 1 - 1 - 1



ACCOUNT NO. : 07210000032

REFERENCE: 106324 7480744

AUTHORIZATION :

COST LIMIT : \$

ORDER DATE: May 15, 2006

ORDER TIME : 11:56 AM

ORDER NO. : 106324-005

CUSTOMER NO: 7480744

DOMESTIC FILING

NAME: DEEP WATERS CAPITAL, LLC

XX ARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX PLAIN STAMPED COPY

CONTACT PERSON: Heather Chapman - EXT. 2908

EXAMINER'S INITIALS:

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

FOR			
FLORIDA LIMITED LIAB	BILITY COMPANY		
ARTICLE I - Name: The name of the Limited Liability Company is: Deep Waters Capital, LLC	BILITY COMPANY		
ARTICLE II - Address: The mailing address and street address of the princip	oal office of the Limited Liability Company is:		
Principal Office Address:	Mailing Address:		
1571 Ocean View Drive	1571 Ocean View Drive		
Tierra Verde, Florida 33715	Tierra Verde, Florida 33715		
ARTICLE III - Registered Agent, Registered Off The name and the Florida street address of the regist			
Stacey A. Seldin			
Name			
1571 Ocean View Drive Florida street address (P.O. Box	x <u>NOT</u> acceptable)		
Tierra Verde City, State, and Z	FLORIDA 33715 ip		

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..

Registered Agent's Signature

Stacey A. Seldin

Page 1 of 2 (CONTINUED)

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	Stacey A. Seldin 1571 Ocean View Drive
	Tierra Verde, Florida 33715
(Use attachment if necessary)	
NOTE: An additional article must be	added if an effective date is requested.
REQUIRED SIGNATURE: Signature of a member or an au	thorized representative of a member.
	408(3), Florida Statutes, the execution ffirmation under the penaltics of perjury

By: Stacey A. Seldin

that the facts stated herein are true.)

Typed or printed name of signee

Filing Fees:

- \$100.00 Filing Fee for Articles of Organization
- \$ 25.00 Designation of Registered Agent
- \$ 30.00 Certified Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)