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Florida Department of State
Division of Corporations
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To:
Division of Corporations
Fax Number : (850) 205-0383

From:
Account Name : EMPIRE CORPORATE KIT COMPANY
Account Number : 072450003255
Phone : (305) 634-3694
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DIVISION OF CORPORATIONS
FLORIDA/FOREIGN LIMITED LIABILITY CO.

high and dry marine llc

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Help

3

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

HIGH AND DRY MARINE LLC

ARTICLE I

**The name of the Limited Liability Company shall: HIGH AND DRY
MARINE LLC**

ARTICLE II

**The Company is organized for any legal and lawful purpose for
which a limited liability company may be organized pursuant to the Act.**

ARTICLE III

**The mailing address and street address of the principal office of the
Limited Liability Company is: 2120 S. BAYSHORE DRIVE, MIAMI, FL
33133.**

ARTICLE IV

**The name and the Florida street address of the registered agent:
DONALD M. PATTON, 2120 S. BAYSHORE DRIVE, MIAMI, FL 33133.**

ARTICLE V

**The name of the Manager(s) and Member(s) for this company shall
be:**

MANAGER

ANTHONY T. JONES

MEMBER

ELSA C. PATTON

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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**CERTIFICATE OF DESIGNATION
REGISTERED AGENT/REGISTERED
OFFICE/MEMBER/REPRESENTATIVE**

HIGH AND DRY MARINE LLC

Having been named as registered agent and to accept service of process for the above stated Limited Liability Company at the place designated in the articles of organization, 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.

Donald M. Patton
Registered Agent

DONALD M. PATTON

Anthony T. Jones
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.)

ANTHONY T. JONES

Typed or printed name of signee

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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