

W6 000053959

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

From: Account Name : FAS-T CORP. AGENTS, INC.  
Account Number : 071001002335  
Phone : (305) 599-0839  
Fax Number : (305) 716-0346

TAXEXP  
SECRETARY OF STATE  
ALLAHASSEE, FLORIDA  
2006 MAY 24 AM 10:41

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DIVISION OF CORPORATIONS

FLORIDA/FOREIGN LIMITED LIABILITY CO.

GEORGE PINON MARINE LLC

Certificate of Status	0
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EFFECTIVE DATE  
5-19-06

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

**ARTICLE I - Name:**

The name of the Limited Liability Company is:

**GEORGE PINON MARINE LLC**

**ARTICLE II - Address:**

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

**Principal Office Address:**

**5707 HAYES STREET**  
**HOLLYWOOD FL 33021**

**Mailing Address:**

**5707 HAYES STREET**  
**HOLLYWOOD FL 33021**

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

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

**GEORGE PINON**  
**5707 HAYES STREET**  
**HOLLYWOOD FL 33024**

*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)

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**ARTICLE IV- Manager(s) or Managing Member(s):**

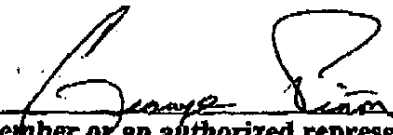
The name and address of each Manager or Managing Member is as follows:

**Title: Name and Address:**

**GEORGE PINON-MGR  
5707 HAYES STREET  
HOLLYWOOD FL 33021**

**ARTICLE V: Effective date, if other than the date of filing: May 19, 2006**  
**(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)**

**REQUIRED SIGNATURE:**

  
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.)

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2006 MAY 24 AM 10:41

FILED

George Pinon

Typed or printed name of signee