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	SECRETARY TALL MANAGE
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FLORIDA DEPARTMENT OF STATE JULY SECRETARY OF STATE THE STATE ALL ALLASSEE, FLORIDA

May 10, 2006

ROBERT W. STERRETT III 1502 N. 19TH STREET YBOR CITY, FL 33605

SUBJECT: BURIAL AT SEA, LLC Ref. Number: W06000021707

We have received your document for BURIAL AT SEA, LLC, however, upon receipt of your document no check was enclosed. Please send a check or money order payable to the Department of State for \$125.00.

If you have any questions concerning the filing of your document, please call (850) 245-6094.

Agnes Lunt Document Specialist

Letter Number: 606A00033112

TRANSMITTAL LETTER

TO:

Registration Section

Division of Corporations

2005 JUN -6 P 4: Ob

SUBJECT: BUTIAL

(Name of Limited Liability Company)

SECRETARY OF STATE TALLAHASSEE, FLORIDA

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

Please return all correspondence concerning this matter to the following:

For further information concerning this matter, please call:

(Name of Person)

STREET ADDRESS

Registration Section Division of Corporations 409 E. Gaines Street Tallahassee, FL 32399

MAILING ADDRESS:

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

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

2006 JUN -6 P 4: 07

SECRETARY OF STATE TALLAHASSEE, FLORIDA

ARTICLE I - Name:	TALLAHASSE
The name of the Limited Liability Company is:	
Burial At SEA, LLC	
ARTICLE II - Address: The mailing address and street address of the principal	al office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
1502 N. 19th Street	
Ybor City, FLA 33605	
ARTICLE III - Registered Agent, Registered Of The name and the Florida street address of the registered Name	ercett II
Florida street address (P.O. B	-
·	FLORIDA 33605
City, State, and Having been named as registered agent and to accept serv company at the place designated in this certificate, I hereb agree to act in this capacity. I further agree to comply with and complete performance of my duties, and I am familiar registered agent as provided fo	ice of process for the above stated limited liability y accept the appointment as registered agent and the provisions of all statutes relating to the proper with and accept the obligations of my position as r in Chapter 608, F.S.

Page 1 of 2 (CONTINUED)

ARTICLE IV- Manager(s) or Managing The name and address of each Manager or	g Member(s): Managing Member is as follows:	FILED
Title: "MGR" = Manager	Name and Address:	2005 JUN -6 P 4: 07
"MGRM" = Managing Member		SECRETARY OF STATE TALLAHASSEE, FLORIDA
MGRM	Rick Thompson 1502 N. 19th St Yboraty, FL 3360	······
MGRM	Peter Guzzo 1500 N. 19th St Ybor City, FLA 336	
		
(Use attachment if necessary)		
NOTE: An additional article must be adde	ed if an effective date is requested.	
REQUIRED SIGNATURE:		
Signature of a member of	or an authorized representative of a men	nber.
of this document constituent that the facts stated herei	19te OUT	
Тур	ed 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)		