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CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301
(850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

Shinsea Timber and Mining LLC

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**ARTICLES OF ORGANIZATION
FOR
SHINSEA TIMBER AND MINING LLC**

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The undersigned, for the purpose of forming a company under the Florida Limited Liability Act, hereby adopts the following Articles of Organization.

ARTICLE I: NAME

The name of the company is **SHINSEA TIMBER AND MINING LLC**

ARTICLE II: PRINCIPAL OFFICE

The principal office and mailing address of the company is **815 Orienta Avenue, Suite 1060, Altamonte Springs, FL 32701.**

ARTICLE III: INITIAL REGISTERED AGENT AND ADDRESS

The name and address of the initial registered agent is **Hal Uhrig, 815 Orienta Avenue, Suite 1060, Altamonte Springs, FL 32701.**


ARTICLE IV: MANAGERS

The name and address of the initial Managers of the company are:

Manager: Hal Uhrig, 815 Orienta Avenue, Suite 1060, Altamonte Springs, FL 32701.

The undersigned has executed these Articles of Organization this 14th day of November 2006.

"Your Capital Connection, Inc. by, Stacey Piland, Client Representative"



Authorized Representative

NOV. 14. 2000 5:50PM

CAPITAL CONNECTION

NO. 3275 P. 1

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

Pursuant to the provisions of section 608.415, Florida Statutes, the mentioned company, organized under the laws of the State of Florida, submits the following statement in designating the registered agent/registered office, in the State of Florida.

1. The name of the company is: SHINSEA TIMBER AND MINING LLC

2. The name and address of the registered agent and office is: Mr. H. H. H. H.
815 Oriole Ave., Ste 1060, Altamonte Springs,
FL 32701

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED 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.

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