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COVER LETTER

TO: **Registration Section Division of Corporations**

OceanTech Cruises, L.L.c. SUBJECT: _ (Name of Limited Liability Company)

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

Please return all correspondence concerning this matter to the following:

Andrew J. Kohan, ESQ.

(Name of Person)

Andrew J. Kohan, P.A.

(Firm/Company)	<u>-</u>	
5140 Coconut Creek Parkway	2001 A SECR TALLA	-71
(Address) Margate, FL 33063	PR -9 (ETARY D HASSEE.	
(City/State and Zip Code) For further information concerning this matter, please call:	> 4: 06 F STATE F LORIDA	0

(Area Code & Daytime Telephone Number) Andrew J. Kohan 9<u>54</u> at ((Name of Person)

Enclosed is a check for the following amount:

S125.00 Filing Fee S130.00 Filing Fee & Certificate of Status

\$155.00 Filing Fee & Certified Copy (additional copy is enclosed)

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x \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

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

Street/Courier Address

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I The name of the Limited Liability Company OceanTec

Cruises, L.L.C.

ARTICLE II

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

Principal Office Address:

Mailing Address:

10033 N.W. 20 Street Coral Springs, FL 33071 10033 N.W. 20 Street Coral Springs, FL 33071

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ARTICLE III

The name of the initial registered agent of this Limited Liability Company is Paul Waxman, whose address for service of process is 10033 N.W. 20 Street, Coral Springs, Florida 33071.

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 register 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 agent as provided in Chapter 608, F.S.

Registered Agent's Signature

ARTICLE IV

The initial registered office is located at 10033 N.W. 20 Street, Coral Springs, FL 33071.

ARTICLE V

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

Managing Member

1

Paul Waxman 10033 NW 20 St. Coral Springs, FL 33071

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Signature of member or an authorized representative or a member

Typed or printed name of signee PAUL WAXMAN

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