

L08000027888

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

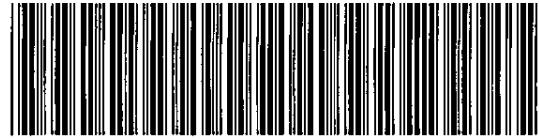
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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RECEIVED
08 MAR 18 PM 12:40
DEPARTMENT OF STATE
DIVISION OF CORP. FLORIDA
TALLAHASSEE, FLORIDA

FILED
08 MAR 18 AM 8:21
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

B. KOHR
MAR 19 2008
EXAMINER



CORPORATION SERVICE COMPANY

ACCOUNT NO. : 072100000032

REFERENCE : 490452 7255924

AUTHORIZATION :

Debbie Skipper

COST LIMIT : \$ 125.00

FILED
08 MAR 18 AM 8:21
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ORDER DATE : March 18, 2008

ORDER TIME : 11:51 AM

ORDER NO. : 490452-005

CUSTOMER NO: 7255924

DOMESTIC FILING

NAME: SOUNDWAVE MARINE ELECTRONICS,
LLC

EFFECTIVE DATE:

- ARTICLES OF INCORPORATION
- CERTIFICATE OF LIMITED PARTNERSHIP
- ARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

- CERTIFIED COPY
- PLAIN STAMPED COPY
- CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Debbie Skipper - EXT. 2948

EXAMINER'S INITIALS: _____

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

FILED
08 MAR 18 AM 8:21
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE I - Name:

The name of the Limited Liability Company is:

Soundwave Marine Electronics, LLC.

(Must end with the words "Limited Liability Company," "L.L.C.," or "LLC.")

ARTICLE II - Address:

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

Principal Office Address:

14603 Beach Blvd. Suite # 200
Jacksonville, Florida 32250

Mailing Address:

14603 Beach Blvd. Suite # 200
Jacksonville, Florida 32250

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

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

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

Guillermo Coquelet

Name

14603 Beach Blvd. Suite # 200

Florida street address (P.O. Box **NOT** acceptable)

Jacksonville FL 32250

City, State, and Zip

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)

(CONTINUED)

Page 1 of 2

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

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

Title:

"MGR" = Manager

"MGRM" = Managing Member

Name and Address:

MGRM

Guillermo Coquelet

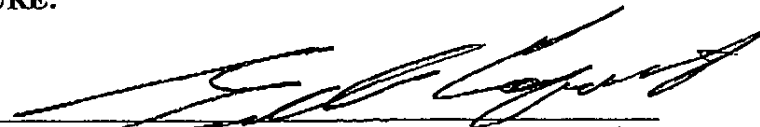
14603 Beach Blvd. Suite # 200

Jacksonville, Fl. 32250

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: _____ (OPTIONAL)
(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.)

Guillermo Coquelet

Typed or printed name of signee

Filing Fees:

- \$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
- \$ 30.00 Certified Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)