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CORPORATION NAME (S) AND DOCUMENT NUMBER (S):

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	Filing Evidence ⊠ Plain/Confirmation C	lopy ⊪	٥	Type of Document Certificate of Status Certificate of Good Standing	
	□ Certified Copy		٥	Certificate of Good Standing	
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Other

ARTICLES OF ORGANIZATION OF TF MARINE CONSULTING, LLC

OS MAN CALL.

The undersigned person(s) pursuant to the provisions of the Florida Limited Liability Company Act, hereby adopt the following Articles of Organization:

FIRST: The name of the Limited Liability Company shall be TF MARINE CONSULTING, LLC (hereinafter "Company").

SECOND: The period of its duration shall be perpetual.

THIRD: The mailing address and street address of the principal office are 3128 River Grove Circle, Fort Myers, FL 33905.

FOURTH: The name and street address of the registered agent within the State of Florida is Cheryl L. Fischer, 3128 River Grove Circle, Fort Myers, FL 33905.

FIFTH: The Limited Liability Company is tobe member managed.

SIXTH: The person or persons executing these Articles of Organization is a member or the authorized representative of a member of the Limited Liability Company.

IN WITNESS WHEREOF, the undersigned have executed these Articles of Organization of and acknowledged them to be our act and deed this 974 day of March, 2009.

THOMAS E. FISCHER

CHERYL L. FISCHER

STATE OF FLORIDA COUNTY OF LEE

SWORN TO and subscribed before me this <u>916</u> day of March, 2009, by THOMAS E. FISCHER and CHERYL L. FISCHER who [X] are personally known to me or who [] have produced <u>NA</u> as identification and who did take an oath.

My commission expires:

SHERRY N. SIMES
MY COMMUSSION # DD818428
EXPIRES: Septerabor 16, 2012

Notary Public

ACKNOWLEDGMENT OF REGISTERED AND RESIDENT AGENT

Having been named to accept service of process for the above-stated limited liability company, at the place designated in this certificate, I hereby agree to act in this capacity, and agree to comply with the provisions of said act relative to keeping open said office.

CHERYL L. FISCHER, Registered Agent