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SECRETARY OF STATE TALLAHASSEE, FLORIDA

D. BRUCE

AUG 28 2009

EXAMINER

COVER LETTER

TO:	Registration Section Division of Corporations	
SUBJE	ECT: Meyer Marine Services Name of Limited Liability Company	
The en	nclosed Articles of Organization and fee(s) are submitted for filing.	
Please	return all correspondence concerning this matter to the following:	
	Alexander W Mayer Name of Person	
	Meyer Marine Services Firm/Company	
	1401 Bay Road	
	Address	A.C. O
	Miami Beach, Fl 33139	9 Aug
-	Address Miami Beach [Fl 33139 City/State and Zip Code bigame/er & Gmail. com E-maileddress: (to be used for future annual report notification)	IG 27 PH IJARY OF IJASSEE, FI
	rther information concerning this matter, please call:	STATE
<u> </u>	Alex Mayer at (646) \$12-0169 Name of Person Area Code & Daytime Telephone Nu)A
Enclos	sed is a check for the following amount:	
X \$125.	Certificate of Status Certified Copy Certificate of Status (additional copy is enclosed) Certified Copy (additional copy is enclosed)	00 Filing Fee, icate of Status & ied Copy onal copy is enclosed)
	Mailing AddressStreet/Courier AddressRegistration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Principal Office Ad	ldress:	Mailing Address:	
Miami Brach	d # 304 FI 33139	1401 Bay Road Miam. Beach, Fl 3313	# 304
The Limited Liability Con business entity with an ac	orida street address of the report of the registration.) Name 40 Bay Road Florida street address (P.O.)	Meyer # 304	

Registered Agent's Signature (RÉQUIRED)

EFFECTIVE DATE 911/09 (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:		Name and Address:
"MGR" = Manag		
		n. J. 11.
MGR	**************************************	Alexander Neyer
		1401 Bay Rd #304 Miami Beach Fl 33139
		Tollam Deach II Solo I
		
	<u> </u>	
(Use attachment	:f====================================	
CLE V: Effective	date, if other than the	e date of filing: 9/1/09 (OPTIONAL)
effective date is lis	sted, the date must be	e specific and cannot be more than five business days pr
0 days after the d	ate of ming.)	
REQUIRED SI	GNATURE:	
	/M	
	Signature of a membe	er or an authorized representative of a member.
	(In accordance with see	ection 608.408(3), Florida Statutes, the execution
	of this document consi	stitutes an affirmation under the penalties of perjury
	that the facts stated her	erein are true.) S_{∞}^{A}
	that the facts stated her	
Filing Fees	that the facts stated her	yped or printed name of signee To
	that the facts stated her Alexand Ty	yped or printed name of signee
\$125.00 Filing	that the facts stated her Alexand Ty	yped or printed name of signee
\$125.00 Filing of Reg \$ 30.00 Certific	that the facts stated her ALLY ALLY Ty Fee for Articles of Orga	yped or printed name of signee Appearance For Appe