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(Requestor's Name)			
(Address)			
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PICK-UP WAIT MAIL			
(Business Entity Name)			
(Document Number)			
Certified Copies Certificates of Status			
Special Instructions to Filing Officer:			
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EXAMINER			

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SECRETARY OF STATE

FILED

COVER LETTER

TO: Registration Division of	on Section Corporations	
SUBJECT:	Transoce	eanic International LLC
	Name of Limit	ed Liability Company
The enclosed Article	es of Organization and fee(s) are	submitted for filing.
Please return all corr	respondence concerning this mat	ter to the following:
	Jo	shua Michaels
		Name of Person
	Transo	ceanic International
		Firm/Company
	1560 Sawgrass	Corporate Parkway, 4th floor
		Address
	Su	nrise, FL 33323
		y/State and Zip Code
<u> </u>	E-mail address: (to be used	ruls Transaceanic @ gmail. Co
For further informati	ion concerning this matter, pleas	e call:
	shua Michaels	at (954) 254-6671 Area Code & Daytime Telephone Number
Na	me of Person	Area Code & Daytime Telephone Number
Enclosed is a check	k for the following amount:	
¶\$125.00 Filing Fe	ce \$\int\\$130.00 \text{ Filing Fee & Certificate of Status}\$	S155.00 Filing Fee & S160.00 Filing Fee, Certified Copy (additional copy is enclosed) \$\text{Certified Copy} \text{(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

Transoceanic Inte	
(Must end with the words "Limited Lia	bility 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:	Mailing Address:
1560 Sawgrass Corporate Parkway,4th	1560 Sawgrass Corporate Parkway, 4
	Sunrise, FL 33323 ed Office, & Registered Agent's Signature:
ARTICLE III - Registered Agent, Register (The Limited Liability Company cannot serve as its own Register)	Sunrise, FL 33323 ed Office, & Registered Agent's Signature: gistered Agent. You must designate an individual or another
ARTICLE III - Registered Agent, Register (The Limited Liability Company cannot serve as its own Registers entity with an active Florida registration.) The name and the Florida street address of the	Sunrise, FL 33323 ed Office, & Registered Agent's Signature: gistered Agent. You must designate an individual or another
ARTICLE III - Registered Agent, Register (The Limited Liability Company cannot serve as its own Registers entity with an active Florida registration.) The name and the Florida street address of the	Sunrise, FL 33323 ed Office, & Registered Agent's Signature: gistered Agent. You must designate an individual or another e registered agent are: Michaels
ARTICLE III - Registered Agent, Register (The Limited Liability Company cannot serve as its own Registers business entity with an active Florida registration.) The name and the Florida street address of the Joshua Nan	Sunrise, FL 33323 ed Office, & Registered Agent's Signature: gistered Agent. You must designate an individual or another e registered agent are: Michaels ne
ARTICLE III - Registered Agent, Register (The Limited Liability Company cannot serve as its own Registers business entity with an active Florida registration.) The name and the Florida street address of the Joshua Nam 1560 Sawgrass Corpo	Sunrise, FL 33323 ed Office, & Registered Agent's Signature: gistered Agent. You must designate an individual or another e registered agent are: Michaels
ARTICLE III - Registered Agent, Register (The Limited Liability Company cannot serve as its own Registers business entity with an active Florida registration.) The name and the Florida street address of the Joshua Nam 1560 Sawgrass Corpo	Sunrise, FL 33323 ed Office, & Registered Agent's Signature: gistered Agent. You must designate an individual or another e registered agent are: Michaels ne rate Parkway, 4th floor

egisterea agent and agree to act in this capacity. I jurther 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..

(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:

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:
MGR	Joshua Michaels 1560 Sawgrass Corporate Parkway, 4th fl Sunrise, FL 33323
(Use attachment if necessary)	
	late of filing: September 14, 2009. (OPTIONAL) specific and cannot be more than five business days prior
REQUIRED SIGNATURE:	,
Signature of a member	or an authorized representative of a member.
(In accordance with section of this document constituent that the facts stated here	ion 608.408(3), Florida Statutes, the execution lutes an affirmation under the penalties of perjury in are true.)
	Joshua Michaels

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)

O9 SEP IS AM 8: 54

Typed or printed name of signee