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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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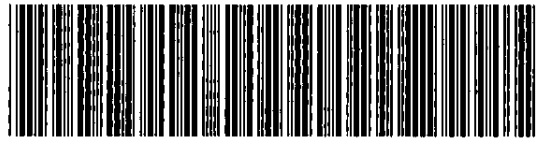
(Business Entity Name)

(Document Number)

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T. HAMPTON  
DEC - 4 2009  
EXAMINER

**GLICKMAN, WITTERS AND MARELL, P.A.**  
ATTORNEYS AT LAW  
THE CENTURION  
SUITE 1101  
1601 FORUM PLACE  
WEST PALM BEACH, FL 33401

GARRY M. GLICKMAN  
CURTIS L. WITTERS  
BOARD CERTIFIED IN MARITAL AND FAMILY LAW  
WILLIAM J. MARELL  
ELIZABETH A. MONTGOMERY  
CINDY A. CRAWFORD  
JOSEPH R. LOWICKY

TELEPHONE  
(561) 478-1111

TELECOPIER  
(561) 478-2433

December 1, 2009

**Via Certified Mail/RRR**

Corporate Record Bureau  
Division of Corporations  
Department of State  
P. O. Box 6327  
Tallahassee, Florida 32301

Reference: **WHITE MARLIN POOL SERVICE, LLC**

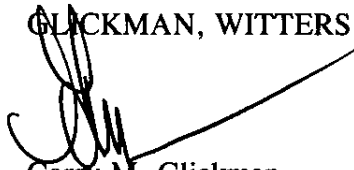
Gentlemen:

We are enclosing one original and a duplicate copy of the Articles of Organization for the above referenced proposed company together with a Designation of Registered Agent and Acceptance of Designation. The duplicate copy of the Articles have been subscribed and acknowledged by the subscriber in the same manner as the original.

Please endorse your approval of the Articles of Organization on the duplicate copy, certify and return it to us. Enclosed is our check in the amount of \$125.00 for the filing of these documents

Sincerely,

GLICKMAN, WITTERS & MARELL, P. A.



Garry M. Glickman

GMG:sn  
Enclosures (as noted above)

**ARTICLES OF ORGANIZATION**

**OF**

**WHITE MARLIN POOL SERVICE, LLC**

The undersigned organizer hereby forms a limited liability company under the laws of the State of Florida:

**ARTICLE I**

**COMPANY NAME**

The name of this company is:

**WHITE MARLIN POOL SERVICE, LLC**

**ARTICLE II**

**COMMENCEMENT AND TERM OF EXISTENCE**

The term of existence of the Company shall commence on the date the Articles of Organization is filed with the Florida Secretary of State, and shall continue perpetually unless dissolved as set forth hereafter.

**ARTICLE III**

**MAILING ADDRESS AND STREET ADDRESS OF THE COMPANY**

The mailing address and the street address of the principal office of the limited liability company is 2755 Casita Way, Apartment 104, Delray Beach, Florida 33445.

**ARTICLE IV**

**REGISTERED AGENT AND REGISTERED AGENT'S ADDRESS**

The Registered Agent and the street address of the Registered Agent of this Company in the State of Florida shall be:

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Michael A. Messineo  
2755 Casita Way, Apartment 104  
Delray Beach, Florida 33445

ARTICLE V

DISSOLUTION

The death, retirement, resignation, expulsion, bankruptcy or dissolution of a member shall not dissolve the Company as long as there remains in existence one (1) member. The Company shall dissolve only as provided in the Operating Agreement of the Company.

ARTICLE VI

MANAGEMENT OF THE COMPANY

The initial Manager of the Company shall be Michael A. Messineo. The Manager, Michael A. Messineo shall be responsible for the management of the Company, and shall have the full right, power and authority to manage, direct and control all of the business and affairs of the company and to transact business on its behalf.

Notwithstanding the foregoing, the Manager shall have the absolute authority to subcontract any management functions of the Company in his sole and absolute discretion.

ARTICLE VII

RIGHTS, LIABILITIES AND OBLIGATIONS OF MEMBERS

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7.1 Liability of Members: No Member shall be personally liable for the expenses, liabilities, debts or obligations of the Company, unless otherwise provided pursuant to Florida Statute §608.

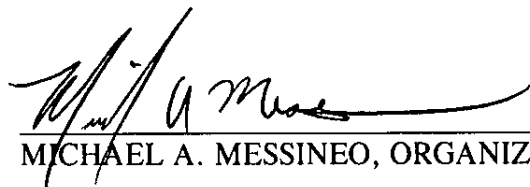
7.2 Return of Capital: No Member shall have the right to demand the return of his/her/its contribution to capital except as provided in the Company's Regulations and Operating Agreement then in existence.

7.3 Non-Assignability of Membership Interest: No Member may assign his Company interest in whole or in part without the express written consent of 100% of the Company's members, including the member attempting to assign his interest.

The assignee of a member's interest shall have no right to participate in the management of the business and affairs of the Company, except i) as provided in the Operating Agreement and, ii) upon the approval of 100% of the members of the limited liability company including the member assigning the limited liability interest and iii) in compliance with any procedure provided for in the Operating Agreement.

The assignee of the member's interest shall have no right to become or to exercise any rights or power of a member, except upon the express written approval of 100% of the members of the Company, including the member assigning the interest.

IN WITNESS WHEREOF, the undersigned Organizer has executed the Articles of Organization, this 30 day of NOVEMBER 2009.

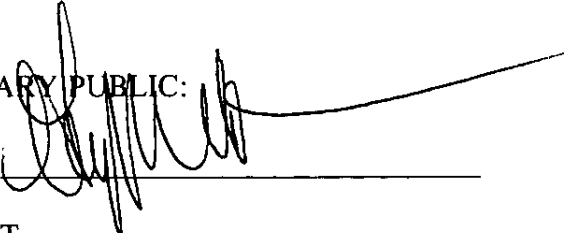
  
MICHAEL A. MESSINEO, ORGANIZER

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SECRETARY OF STATE  
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STATE OF FLORIDA            ]  
  ] ss:  
COUNTY OF PALM BEACH    ]

The foregoing instrument was acknowledged before me this 30 of NOVEMBER, 2009, by MICHAEL A. MESSINEO, Organizer of the afore-described Articles of Organization, who is personally known to me and did not take an oath.

NOTARY PUBLIC:   
SIGN: \_\_\_\_\_  
PRINT \_\_\_\_\_

STATE OF FLORIDA AT LARGE (SEAL)  
MY COMMISSION EXPIRES:



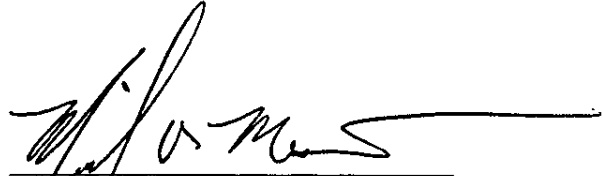
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SECRETARY OF STATE  
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**CERTIFICATE DESIGNATING PLACE OF BUSINESS FOR SERVICE OF PROCESS  
WITHIN THIS STATE, NAMING AGENT UPON WHOM PROCESS MAY BE SERVED**

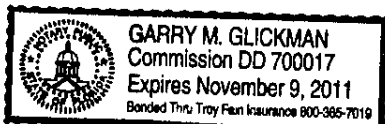
White Marlin Pool Service, LLC, desiring to organize as a Limited Liability Company under the laws of the State of Florida with its principal office as indicated in the Articles of Organization, has named Michael A. Messineo having an address at 2755 Casita Way, Apartment, 104, Delray Beach, Florida 33445 as its agent to accept Service of Process within this State.

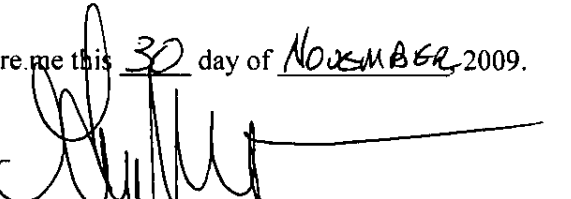
**ACKNOWLEDGMENT**

Having been named to accept Service of Process for the above named Limited Liability Company, at the place designated in this Certificate, I hereby agree to act in this capacity, accept the appointment, and agree to comply with the provisions of the Florida Statutes relative to keeping open said office.

  
\_\_\_\_\_  
Michael A. Messineo

SWORN TO AND SUBSCRIBED before me this 30 day of NOVEMBER, 2009.



  
\_\_\_\_\_  
NOTARY PUBLIC - STATE OF FLORIDA

Name: \_\_\_\_\_  
(Type, stamp or print)

Personally known or produced identification . If produced identification, type or identification produced: N/A

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