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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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WAIT

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MAIL

(Business Entity Name)

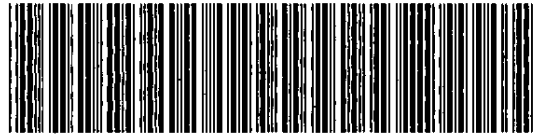
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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T. CLINE

JAN 13 2010

EXAMINER



FLORIDA DEPARTMENT OF STATE
Division of Corporations

January 5, 2010

WILLIAM SEREY
3729 EDGEWATER DR BOX 7
SEBRING, FL 33872

SUBJECT: THE DIVING FORCE LLC
Ref. Number: W10000000323

We have received your document for THE DIVING FORCE LLC and your check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Pursuant to section 608.409(2), F.S., the effective date must be specific, cannot be more than five business days prior to the date of filing or more than 90 days after the date of filing. Our office received your document on January 4, 2010. Please amend your document accordingly.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6020.

Tammi Cline
Regulatory Specialist II

Letter Number: 510A00000236

2010 JAN -4 PM 12:47
SECRET
OFFICE OF THE
CLERK OF THE
SUPREME COURT
TALLAHASSEE, FL 32310-1000

FILED

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: The Diving Force LLC.
Name of Limited Liability Company

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

William J Serey
Name of Person

The Diving Force LLC
Firm/Company

3729 EDGEWATER DR Box 7
Address

Sebring FL 33872
City/State and Zip Code

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

William J. Serey at (863) 402-2100
Name of Person Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

- ☐ \$125.00 Filing Fee ☒ \$130.00 Filing Fee & Certificate of Status ☐ \$155.00 Filing Fee & Certified Copy (additional copy is enclosed) ☐ \$160.00 Filing Fee, Certificate of Status & Certified Copy (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

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2010 JAN -4 PM 12:47
TALLAHASSEE, FL 32301
SECRETARY OF STATE

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

The Diving Force 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:

4241 Commercial Dr
Sebring FL 33870

Mailing Address:

3729 Edgewater Dr
Box 7
Sebring FL 33872

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:

William J. Seery
Name

3729 Edgewater Dr, Sebring FL 33872
Florida street address (P.O. Box NOT acceptable)

Sebring FL 33872
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.

William J. Seery
Registered Agent's Signature (REQUIRED)

(CONTINUED)

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:

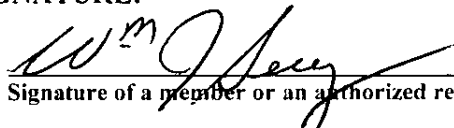
MGRM

William J Serey
3729 Edgewater Dr
Spring FL 33872

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: 01/01/2010 ~~01/01/09~~ up (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.)

William J Serey
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)