

Division of Corporations

Florida Department of State
Division of Corporations
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(((H10000037103 3)))



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To:

Division of Corporations
Fax Number : (850) 617-6383

From:

Account Name : HUBCO
Account Number : 104662003400
Phone : (516) 935-3940
Fax Number : (516) 935-3088

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: CS-wing@wrightmaritime.com

FLORIDA/FOREIGN LIMITED LIABILITY CO.**Wright Vessel Operations LLC**

Certificate of Status	1
Certified Copy	0
Page Count	02
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D. BRUCE

FEB 19 2010

EXAMINER**RECEIVED**

10 FEB 18 PM 12:26

SECRETARY OF STATE
TALLAHASSEE, FLORIDA**FILED**

10 FEB 18 AM 8:56

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

H10000037103

ARTICLES OF ORGANIZATION
FOR
FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name

The name of the Limited Liability Company is: **Wright Vessel Operations 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:

800 S. Andrews Avenue, Suite 200

800 S. Andrews Avenue, Suite 200

Fort Lauderdale, FL 33316

Fort Lauderdale, FL 33316

ARTICLE III - Registered Agent, Registered Office & Registered Agent's Signature

The name and Florida street address of the registered agent are:

Cynthia Schiffelbian

Name

800 Coconut Drive

(P.O. Box or Mail Drop Box NOT Acceptable)

Fort Lauderdale, FL 33315

(City / State / Zip)

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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.

Cynthia Schiffelbian

Registered Agent's Signature - Cynthia Schiffelbian

ARTICLE IV - Manager(s) or Managing Member(s):

H10000037103

The name and address of each Manager or Managing Member is as follows:

Title:

"MGR" = Manager

"MGRM" = Managing Member

Name and Address:

MGRM

AJ Anderson

800 S. Andrews Avenue, Suite 200
Fort Lauderdale, FL 33316

(Use attachment if necessary)

REQUIRED SIGNATURE:



Signature of a member or 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.)

AJ Anderson

Typed or printed name of signee

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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