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Florida Department of State
Division of Corporations
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To: Division of Corporations
Fax Number : (850) 617-6383

L. SELLERS

MAR 30 2010

From: Account Name : C T CORPORATION SYSTEM
Account Number : PCA000000023
Phone : (850) 222-1092
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EXAMINER

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

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FLA Limited Liability Company
Sea Glass LLC

Certificate of Status	0
Certified Copy	1
Page Count	04
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Sea Glass, 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:

Victoria L. Wallace
Name of Person

Sea Glass, LLC
Firm/Company

945 Melvin Road
Address

Annapolis, MD 21403
City/State and Zip Code

ricka@neuman-cpa.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Terry Hunt at (800) 716-0507
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

ARTICLES OF ORGANIZATION

OF

SEA GLASS, LLC

The undersigned Member or Authorized Representative of a Member signs these Articles of Organization and forms a limited liability company (the "*Company*") under the Florida Limited Liability Company Act (the "*Act*"), as follows:

NAME

The name of the Company is: Sea Glass, LLC.

MAILING ADDRESS AND STREET ADDRESS

The mailing address and street address of the principal office of the Company is: c/o Victoria L. Wallace, 945 Melvin Road, Annapolis, MD 21403.

NAME AND ADDRESS OF MANAGER


The name and address of the sole Manager of the Company is Victoria L. Wallace, 945 Melvin Road, Annapolis, MD 21403.

EXISTENCE

The date when the Company's existence will commence on March 29, 2010 in accordance with Section 608.409(1) of the Act.

INITIAL REGISTERED OFFICE AND AGENT

The name and street address of the initial registered agent and office of the Company are: c/o CT Corporation System, 1200 South Pine Island Road, Plantation, Florida 33324.


Marianne Schmitt Hellauer
Authorized Representative of Member


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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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ACCEPTANCE BY REGISTERED AGENT

I accept the appointment as Registered Agent of the Company to accept service of process on its behalf at the place designated in these Articles of Organization. I am familiar with, and accept, the obligations of my position as registered agent as provided for in the Act.

CT CORPORATION
Chris McNeair
Assistant Secretary

By: 
Name: _____
Title: _____

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TALLAHASSEE, FLORIDA