PKC0000011

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer: L. SELLERS				
MAY. 1.4 2010 EXAMINER				

Office Use Only



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SECRETARY OF STATE
AND LANA SSEEL FI ORID.

COVER LETTER

TO:	Registration : Division of Co		· ·		
	BOOKI	2011 4 011 4 011 14 0 1 1 0			
SUBJE	ECT: POSEIL	OON AQUARIUMS LLC			
		Name of Limit	ed Liability Company		
The en	closed Articles of	of Organization and fee(s) are	submitted for filing.		
Please	return all corresp	pondence concerning this mat	ter to the following:		
	CHRISTOPH	ER JON DIPACE			
			Name of Person		
	POSEIDON A	AQUARIUMS			
	Firm/Company				
4797 GLADIATOR CIRCLE					
			Address		
	GREENACRE				
			y/State and Zip Code		
-	POSEIDONA	QUARIUMS@YAHOO.C	OM for future annual report notification)	· · · · · · · · · · · · · · · · · · ·	
		E-man address. (to be used t	or future annual report notification)		
For fur	ther information	concerning this matter, please	e call:		
	,				
CHRIS DIPACE			at (561) 758-3426		
	Name	of Person	Area Code & Daytime Telephone Number		
Enclos	sed is a check for	or the following amount:			
⊒ \$125.	00 Filing Fee	2\$130.00 Filing Fee & Certificate of Status	Certified Copy (additional copy is enclosed) \$160.00 Filing Fee Certificate of Statu Certified Copy (additional copy is enclosed)	s &	
	J	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		



A. 3.



FLORIDA DEPARTMENT OF STATE Division of Corporations

May 5, 2010

CHRISTOPHER JON DIPACE 4797 GLADIATOR CIRCLE GREENACRES, FL 33463

SUBJECT: POSEIDON AQUARIUMS LLC

Ref. Number: W10000021821

We have received your document for POSEIDON AQUARIUMS 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):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity. Section 608.406, Florida Statutes, was amended effective July 1, 2007, to require the name of a limited liability company to be distinguishable from the names of all other filings filed with the Division of Corporations, except for fictitious name registrations and general partnership registrations.

Please select a new name and make the correction in all the appropriate places. One or more words may be added to make the name distinguishable from the one presently on file. Adding of Florida or Florida to the end of the name is not acceptable. A search for name availability can be made on the Internet through the Division's records at www.sunbiz.org.

Please note the name of a limited liability company must end with the words Limited Liability Company, the abbreviation L.L.C., or the designation LLC. The word Limited may be abbreviated as Ltd. and the word Company may be abbreviated as Co. The following suffixes are no longer acceptable: Limited Company, L.C., and LC.

The document number of the name conflict is L08000093761.

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) 245-6967.

Leslie Sellers Regulatory Specialist II

Letter Number: 710A00011193

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:					
The name of the Limited Liability Comp	any is:				
POSEIDON AQUARIUMS LLC Poseidon Aquariums 1 LLC (Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")					
ARTICLE II - Address:		,			
The mailing address and street address of	f the principal office of the Limited L	iability Company is:			
Principal Office Address:	Mailing Address:				
4797 GLADIATOR CIRCLE	4797 GLADIATOR CIRCLE				
GRENACRES FL,33463	GREENACRES FL,33463				
The name and the Florida street address of CHRISTOPHER JO		·			
CHRISTOPHER JO	Name				
4707 CLADIATOR					
4797 GLADIATOR Florida s	treet address (P.O. Box NOT acceptable)				
GREENACRES	FL 33463				
······································	City, State, and Zip				
Having been named as registered agent of liability company at the place designategistered agent and agree to act in this constatutes relating to the proper and compacted the obligations of my position of the proper and constant accept the obligations of the proper accept the obligations of the proper accept the obligations of the proper accept the proper accept the obligations of the proper accept the obligations of the proper accept the obligations of the proper accept the proper accept the obligations of the proper accept the obligations accept the obligat	ted in this certificate, I hereby accept t capacity. I further agree to comply wit	the appointment as In the provisions of all Im familiar with and			
Missey	her fon bilber	10 M			
Registered Agent'	s Signatur#(REQUIŘED)	MAY CORETA			
· (C	CONTINUED)	NR)			

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 Walling Member	CHRISTOPHER JON DIPACE 4797 GLADIATOR CIRCLE GREENACRES FL,33463
- 	
•	
	
(Use attachment if necessary)	
	the date of filing: 04-29-20010 (OPTIONAL) ast be specific and cannot be more than five business days prior
REQUIRED SIGNATURE:	
Signature of a me	ember of an authorized representative of a member.
	th section 608.408(3), Florida Statutes, the execution

CHRISTOPHER JON DIPACE

that the facts stated herein are true.)

Typed or printed name of signee

of this document constitutes an affirmation under the penalties of perjury

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)