L100000 90974

(Re	questor's Name)	
(Ad	dress)	
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(Cit	y/State/Zip/Phone	÷ #)
PICK-UP	☐ WAIT	MAIL
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EXAMINER



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DEPARTMENT OF STATE
DIVISION OF CONFUNATIONS
TALL SHASSEE, FLORIDA

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B. KOHR

EXAMINER

SECRETARY OF STATE IVISION OF CORPORATION

CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301 (850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

		」
Tmax Marine, LLC		- TO ALL
		Art of Inc. File
		LTD Partnership File
		Foreign Corp. File
		L.C. File
		Fictitious Name File
		Trade/Service Mark
		Merger File
		Art. of Amend. File
		RA Resignation
		Dissolution / Withdrawal
		Annual Report / Reinstatement
		✓ Cert. Copy
		Photo Copy
		Certificate of Good Standing
		Certificate of Status
		Certificate of Fictitious Name
		Corp Record Search
		Officer Search
•		Fictitious Search
Signature		Fictitious Owner Search
orginature.		Vehicle Search
	-	Driving Record
Requested by: SETH 09/20/10		UCC 1 or 3 File
08/30/10	Time	UCC 11 Search
Name Date	Inne	UCC 11 Retrieval
Walk-In Will Pick U	p	Courier

ARTICLES OF ORGANIZATION FOR FLO	ORIDA LIMITED LIABILITY COMPANY		
ARTICLE I - Name: The name of the Limited Liability Company is:	ONE SON		
Tmax Marine, LLC (Must end with the words "Limited Liability	y Company, "L.L.C.," or "LLC.")		
ARTICLE II - Address: The mailing address and street address of the print	ncipal office of the Limited Liability Company is:		
Principal Office Address:	Mailing Address:		
Tmax Marine LLC	6000 NW 77 Court		
7701 NW 54th Street	Miami, Florida 33166		
Miami, Florida 33166			
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Register business entity with an active Florida registration.) The name and the Florida street address of the registration.	red Agent. You must designate an individual or another		
Genovese, Joblove and Ba	ttista, PA		
Name			
200 East Broward Blvd. Suite 1110			
Florida street address (P.O. Box NOT acceptable)			
Ft. Lauderdale	FL FI 33301		
City, Stat	e, and Zip		
liability company at the place designated in th registered agent and agree to act in this capacity statutes relating to the proper and complete per	ccept service of process for the above stated limited its certificate, I hereby accept the appointment as I further agree to comply with the provisions of all formance of my duties, and I am familiar with and tered agent as provided for in Chapter 608, F.S		

(CONTINUED)
Page 1 of 2

Registered Agent's Signature (REQUIRED)

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

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

Title:	Name and Address:
"MGR" = Manager	
"MGRM" = Managing Mem	oer
MGRM	TRUCKMAX
	6000 NW 77 COURT
	MIAMI, FLORIDA 33166
MGRM	ROBERT J. DOLLAR
· · · · ·	6010 NW 77 COURT
	MIAMI, FLORIDA 33166
MGRM	JOSEPH A. DEMARIA
	6010 NW 77 COURT
	MIAMI, FLORIDA 33188
(Use attachment if necessary)
(Oso attachment if necessary	,
TICLE V: Effective date, if other	r than the date of filing: 08/30/2010 (OPTIONAL)
an effective date is listed, the date	e must be specific and cannot be more than five business days price
or 90 days after the date of filing.	
	,
REQUIRED SIGNATURE	•
	\
81	
Signature of	f a member or an authorized representative of a member.
(In accordan	ce with section 608.408(3), Florida Statutes, the execution
of this docur	ment constitutes an affirmation under the penalties of perjury
that the facts	s stated herein are true.)
Joseph A.	DeMaria
	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)