

L10000096654

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

**Note: Please print this page and use it as a cover sheet.** Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H10000204340 3)))



H100002043403ABCO

**Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page.**  
Doing so will generate another cover sheet.

To:

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

100-10

From:

Account Name : HILL WARD HENDERSON  
Account Number : 072100000520  
Phone : (813) 221-3900  
Fax Number : (813) 221-2900

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

Email Address: mwagner@encore-re.com

FLORIDA LIMITED LIABILITY CO.  
SC-Marine & 19, LLC

|                       |          |
|-----------------------|----------|
| Certificate of Status | 1        |
| Certified Copy        | 1        |
| Page Count            | 01       |
| Estimated Charge      | \$160.00 |

RECEIVED  
10 SEP 15 PM 12:38  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED  
10 SEP 15 AM 7:50  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Electronic Filing Menu

Corporate Filing Menu

J. BRYAN  
Help

SEP 15 2010

(((H10000204340 3)))

**ARTICLES OF ORGANIZATION  
OF  
SC-MARINE & 19, LLC**

The undersigned executes these Articles of Organization of SC-Marine & 19, LLC to form a limited liability company pursuant to the Florida Limited Liability Company Act:

**ARTICLE I. NAME**

The name of the limited liability company is: SC-Marine & 19, LLC.

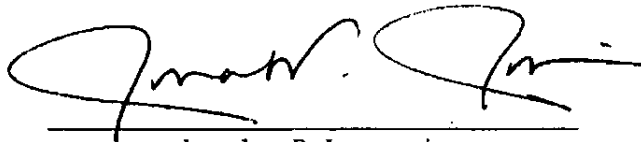
**ARTICLE II. ADDRESS**

The mailing and street address of the principal office of the limited liability company is 100 Main Street, Suite 201, Safety Harbor, Florida 34695.

**ARTICLE III. REGISTERED AGENT AND OFFICE**

The street address of the initial registered office of the limited liability company is 101 E. Kennedy Blvd., Suite 3700, Tampa, Florida 33602, and the name of the limited liability company's initial registered agent at that address is Jonathan P. Jennewein.

*Having been named 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.*

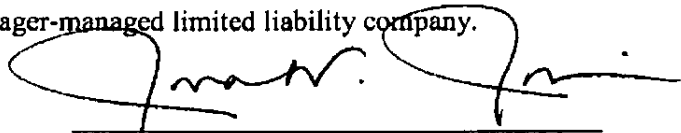


Jonathan P. Jennewein

**ARTICLE IV. MANAGEMENT OF COMPANY**

The limited liability company is a manager-managed limited liability company.

EXECUTED: September 15, 2010



Jonathan P. Jennewein  
Authorized Representative of the Members

(((H10000204340 3)))

FILED  
10 SEP 15 AM 7:50  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA