# L10000108822

(Re	equestor's Name)	
(Ad	idress)	· <u></u> ···
•	•	
(Ad	dress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP		MAIL
<del></del>		<del></del>
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	Certificates	of Status
Special Instructions to	Filing Officer:	
•		
<u> </u>		



500186386715

10/18/10--01017--017 \*\*160.00

SECRETARY OF STATE

Office Use Only

# **COVER LETTER**

TO:

Registration Section
Division of Corporations

SUBJECT: Triton Underwater Serv	vices LLC.
Name of Limite	ed Liability Company
The enclosed Articles of Organization and fee(s) are	submitted for filing.
Please return all correspondence concerning this matt	er to the following:
Richard M. Thurmond	
	Name of Person
Triton Underwater Service	s LLC.
,	Firm/Company
124 River Landing Dr	
	Address
St Augustine, FL 32095	
·	y/State and Zip Code
info@Tritonunderwater.net	
E-mail address: (to be used i	or future annual report notification)
For further information concerning this matter, please	e call:
Richard M. Thurmond	at ( 904 ) 392-9310
Name of Person	Area Code & Daytime Telephone Number
Enclosed is a check for the following amount:	
\$125.00 Filing Fee \$\times \text{Certificate of Status}\$	S155.00 Filing Fee & Silfont Filing Fee, Certified Copy (additional copy is enclosed)  S155.00 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 FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Compan	y is:		
Triton Underwater Services	LLC.		
(Must end with the words "Limited	Liability Company, "L.L.C.," or "LLC.")		
ARTICLE II - Address: The mailing address and street address of th	ne principal office of the Limited Liability Comp	any is	s:
Principal Office Address:	Mailing Address:		
124 River Landing Dr,	124 River Landing Dr,		
St. Augustine, FL 32095	St. Augustine, FL 32095		
		10 OCT 1	OIVISION OF
N	Jame	<del></del>	

124 River Landing Dr, Florida street address (P.O. Box NOT acceptable)

St. Augustine

 $\frac{\text{32095}}{\text{City, State, and Zip}}$ 

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..

Registered Agent's Signature (REQUIRED)

(CONTINUED)

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:

"MGRM" = Managing Member	
MGR	Richard M. Thurmond
	124 River Landing Dr,
	St. Augustine, FL 32095
MGR	Michael A. Chapman
<del></del>	604 Mackenzie Cir
	St. Augustine, FL 32092
(Use attachment if necessary)	
LE V: Effective date, if other than	n the date of filing: (OPTION ast be specific and cannot be more than five business da
days after the date of filing.)	ist be specific and cannot be more than five dusiness da

### **REQUIRED SIGNATURE:**

Signature of a member or an 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. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)

## Richard M. Thurmond

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)

Page 2 of 2