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SECRETARY OF STATE DIVISION OF CORPORATIONS

T. HAMPTON

JAN 2 4 2011

EXAMPLE:

COVER LETTER

Division of Corporations
SUBJECT: LIGHT HOUSE MARINE SERVICE 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:
POBERT ANDERSON Name of Person
LIGHTHOUSE MARINE SERVICE 11C
835 SW 11Th ST Address
Address
Edband Kiwi @ BELL South. NET
City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
- · · · · · · · · · · · · · · · · · · ·
Robert Anderson at (954) 525-0521 Name of Person Area Code & Daytime Telephone Number
Enclosed is a check for the following amount:
\$125.00 Filing Fee & Certificate of Status Certificate of Status Certificate of Status Certified Copy (additional copy is enclosed) S160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing AddressStreet/Courier AddressRegistration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center Circle

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:		
LIGHT HOUSE MARINE SERVICE LLC (Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")	- 	
ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability	Compa	ny is:
Principal Office Address: B35 SWIITH ST FT. LAUDERDALE FL. 733315 Mailing Address: B35 SWIITH ST FT. LAUDERDALE FL. P33	-	
ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signa The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or as business entity with an active Florida registration.)		
The name and the Florida street address of the registered agent are: Pober Aud Firson' Name 835 SW UL ST. Florida street address (P.O. Box NOT acceptable) TT- LANGE COLLE FC. 33315 City, State, and Zip		
Having been named as registered agent and to accept service of process for the above s liability company at the place designated in this certificate, I hereby accept the apport registered agent and agree to act in this capacity. I further agree to comply with the pro- statutes relating to the proper and complete performance of my duties, and I am famili accept the obligations of my position as registered agent as provided for in Chapter	intment ovisions ar with	t as s of all and
Registered Agent's Signature (REQUIRED)	11 JAN 21	SECRETARY
(CONTINUED) Page 1 of 2	品 6.	ORPORAL

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

	The name and address of each Manager of	or Managing Member is as follows:		
	Title: "MGR" = Manager "MGRM" = Managing Member	Name and Address:		
mgr	POBERT ANDERSON	B35 SWILD ST FT LAULER DAGE FO 3331		
WGR	G. WIAN ANDERSON	835 RW 11 IST Ft. I AUL ECJALE FL. 333		-
ARTIO	(Use attachment if necessary)	e of filing: (OPTI	— —	1)
(If an e		ecific and cannot be more than five busines		
	REQUIRED SIGNATURE:			
	Signature of a member or	an authorized representative of a member.		
	constitutes an affirmation under the I am aware that any false information constitutes a third degree felony as		ie. e	
		2T R. ANDERSON		SEIAIE
	Typed Filing Fees:	or printed name of signee	11 JAN 2	SECRETA ISION O
	\$125.00 Filing Fee for Articles of Organiza of Registered Agent	tion and Designation	21 A	100 A 200 A

\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)