L11000024709

(Requestor's Name)			
(Address)			
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(City/State/Zip/Phone #)			
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PICK-UP WAIT MAIL			
4			
(Business Entity Name)			
•			
(Document Number)			
Certified Copies Certificates of Status			
Special Instructions to Filing Officer:			

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200194058832

02/14/11--01044--004 **155.00

Effective Date 02/21/11

DIVISION OF CORPORATIONS

FEB 2 8 2011

EXAMINER

111-7107

COVER LETTER

TO:	Registration Se Division of Co					
SUBJE	ECT: GE MAR	RINE LLC				
	Name of Limited Liability Company					
The en	closed Articles of	Organization and fee(s) are s	submitted for filing.			
Please	return all correspo	ondence concerning this matte	er to the following:			
	GARY ENGEL	_		•		
			Name of Person			
			Firm/Company			
	1114 QUIET C	CREEK RD				
			Address	,		
	PENSACOLA	, FL 32514				
		City	/State and Zip Code			
	CPTGAE@GM			1		
		E-mail address: (to be used f	or future annual report notification)			
For fur	rther information	concerning this matter, please	call:			
GAR	ARY ENGEL at (850) 748-0357 857-1864		857-1864			
	Name	of Person	Area Code & Daytime Telep	hone Number		
Enclo	sed is a check fo	or the following amount:				
□\$125	.00 Filing Fee	□\$130.00 Filing Fee & Certificate of Status	■\$155.00 Filing Fee & □ Certified Copy (additional copy is enclosed)	\$160.00 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 Ci	rcle		



RECEIVED

11 FEB 25 PM 4:00

SECRETARY OF STATE TALLAHASSEE, FLORIDA

FLORIDA DEPARTMENT OF STATE
Division of Corporations

February 15, 2011

GARY ENGEL 1114 QUIET CREEK RD PENSACOLA, FL 32514

SUBJECT: GE MARINE LLC Ref. Number: W11000009107

We have received your document for GE MARINE LLC and your check(s) totaling \$155.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Pursuant to section 608.409(2), F.S., the effective date must be specific, cannot be more than five business days prior to the date of filing or more than 90 days after the date of filing. Our office received your document on February 14, 2011. Please amend your document accordingly.

Please return the corrected original and one copy of 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) 245-6855.

Tammy Hampton
Regulatory Specialist II
Registration/Qualification Section

Letter Number: 411A00003933

Effective Date 02/21/11

ARTICLE I - Name:	
The name of the Limited Liability Comp	pany is:
GE MARINE LLC	
	ted Liability Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address o	of the principal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
1114 QUIET CREEK RD	1114 QUIET CREEK AD
PENSACOLA, FL 32514	PENSACOLA, FL 32514
	gistered Office, & Registered Agent's Signature: own Registered Agent. You must designate an individual or another of the registered agent are:
GARY ENGEL	
	Name
1114 QUIET CREI	EK RD
Florida	street address (P.O. Box NOT acceptable)
PENSACOLA	_{FL} 32514
•	City, State, and Zip
liability company at the place design	and to accept service of process for the above stated limited ated in this certificate, I hereby accept the appointment as capacity. I further agree to comply with the provisions of all

(CONTINUED) Page 1 of 2

accept the obligations of my position as registered agent as provided for in Chapter 608, F.S..

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

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

<u>Title:</u>	Name and Address:
"MGR" = Manager	
"MGRM" = Managing Member	
MGRM	GARY ENGEL
	1114 QUIET CREEK RD
	PENSACOLA, FL 32514
	

ARTICLE V: Effective date, if other than the date of filing: 01/01/2011 2/21/2011. (OPTIONAL) (If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

REQUIRED SIGNATURE:

(Use attachment if necessary)

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.)

GARY ENGEL

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)

SECRETARY OF STATE DIVISION OF CORPORATIONS
11 FEB 25 AN ID: 25