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SEGRETARY OF STATE TABLAHASSEE, FLORIDA

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COVER LETTER

TO:

Registration Section

Division of Corporations
SUBJECT: AQUA - LOGIC MARINE SERVICES, 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:
MARK MARTIN Name of Person
Name of Person
AQUA-LOGIC MARINE SERVICES, LLC.
6314 SONGBIRD WAY
TAMPA, F1 33625 City/State and Zip Code
City/State and Zip Code
E-mail address: (to be used for future annual report notification)
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
MARK MART, J at (813) 961-8142 Name of Person Area Code & Daytime Telephone Number
Enclosed is a check for the following amount:
\$125.00 Filing Fee \$\ \text{Certificate of Status}\$\$ \$155.00 Filing Fee \$\ \text{Certified Copy}\$\$ (additional copy is enclosed) \$\$ \$160.00 Filing Fee, \$\ \text{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

Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:	
AQUA - LOGIC MARINE 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 the principal office of the Limit	ted Liability Company is
Principal Office Address: Mailing Address:	
CO314 SONGBIRD WAY 6314 SONGBIR TAMPA, FI 33625 TAMPA, FI 336	D WAY
ARTICLE III - Registered Agent, Registered Office, & Registered Agent. You must designate at business entity with an active Florida registration.)	
The name and the Florida street address of the registered agent are:	
MARK MARTIN	
Name	
6314 SONGBIRD WAY	
Florida street address (P.O. Box NOT acceptable	e)
Tampa, FL 33625 City, State, and Zip	
Having been named as registered agent and to accept service of process for liability company at the place designated in this certificate, I hereby acceregistered agent and agree to act in this capacity. I further agree to comply statutes relating to the proper and complete performance of my duties, and accept the obligations of my position as registered agent as provided for	ept the appointment as y with the provisions of al d I am familiar with and
) AES 11
Registered Agent's Signature (REQUIRED)	MAY 3
(CONTINUED)	SSEY S

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:

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:
MGR M	MARK MARTIN 6314 SONG BIRS WAY TAMPA, FI 33625
MGRM	ERICA MOULTON 1048 19th AVENUE North ST. PETERS BURG, FI 33704
(Use attachment if necessary)	
ARTICLE V: Effective date, if other than	the date of filing: (OPTIONAL) t be specific and cannot be more than five business days prior
REQUIRED SIGNATURE:	
Signature of a mer	nber or an authorized representative of a member.
constitutes an affirmation u I am aware that any false in	608.408(3), Florida Statutes, the execution of this document nder the penalties of perjury that the facts stated herein are true. formation submitted in a document to the Department of State lony as provided for in s.817.155, F.S.)

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)

MARK MARTIN

Typed or printed name of signee