

L11000078185

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

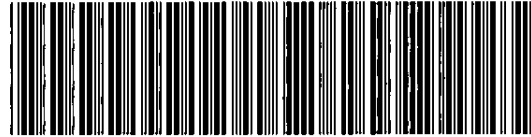
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Spinner LAW FIRM



Registration Section
Division of Corporations

CHARLES S. SPINNER, JR., ESQ.
Admitted in NY & FL
cspinner@spinnerlawfirm.com

ALLISON P. BURD, ESQ.
aburd@spinnerlawfirm.com

SUBJECT: THERMA MARINE, LLC

The enclosed Articles of Organization and fees are submitted for filing.

Please return all correspondence concerning this matter to the following:

Charles S. Spinner, Jr., Esq.
SPINNER LAW FIRM, P.A.
26843 Tanic Dr., Suite 101
Wesley Chapel, FL 33544

For further information concerning this matter, please call:

Charles S. Spinner, Jr., Esq. at (813) 991-5099

Enclosed is a check for the following amount: **\$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 Circle
Tallahassee, FL 32301

**ARTICLES OF ORGANIZATION
OF
THERMA MARINE, LLC**

ARTICLE I - NAME

The name of the limited liability company is **THERMA MARINE, LLC**, ("company").

ARTICLE II - ADDRESS

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:

8909 Regents Park Drive, Suite 400,
Tampa, Florida 33647

Mailing Address:

8909 Regents Park Drive, Suite 400
Tampa, Florida 33647

**ARTICLE III - REGISTERED AGENT,
REGISTERED OFFICE, & REGISTERED AGENT'S SIGNATURE**

The name and the Florida street address of the registered agent are:

EINAR MYKLEBUST
9033 Quail Creek Drive
Tampa, Florida 33647

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..



EINAR MYKLEBUST

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ARTICLE IV - MANAGERS OR MANAGING MEMBERS

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

Title:

"MGR" = Manager

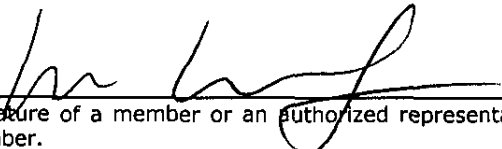
"MGMR" = Managing
Member

Name and Address:

MGMR

EINAR MYKLEBUST
9033 Quail Creek Drive
Tampa, Florida 33647

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.)

THERMA MARINE, LLC

Typed or printed name of signee