

8/27/12

Division of Corporations

L1200021400350

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To:

Division of Corporations
Fax Number : (850) 617-6383

From:

Account Name : HUBCO
Account Number : 104662003400
Phone : (516) 935-3940
Fax Number : (516) 935-3088

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: harry@samuelsaccounting.com

FLORIDA LIMITED LIABILITY CO.

Sea Air Management LLC

Certificate of Status	1
Certified Copy	0
Page Count	02
Estimated Charge	\$130.00

12 AUG 27 AM 10:03
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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12 AUG 27 PM 4:42

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

D. BRUCE

AUG 28 2012

EXAMINER

H12000214003

ARTICLES OF ORGANIZATION
FOR
FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name

The name of the Limited Liability Company is: **Sea Air Management LLC**

ARTICLE II - Address

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

Principal Office Address:

Mailing Address:

757 SE 17th Street, Suite 328

757 SE 17th Street, Suite 328

Fort Lauderdale, FL 33316

Fort Lauderdale, FL 33316

ARTICLE III - Registered Agent, Registered Office & Registered Agent's Signature

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

Harry M. Samuels

Name

2801 Stirling Road, Suite 307

(P.O. Box or Mail Drop Box NOT Acceptable)

Fort Lauderdale, FL 33312

(City / State / 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 - Harry M. Samuels

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

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

Title:

Name and Address:

"MGR" = Manager

"MGRM" = Managing Member

MGR

Robert D. Loveall 757 SE 17th Street, Suite 326
Fort Lauderdale, FL 33316

(Use attachment if necessary)

REQUIRED SIGNATURE:



Signature of a member or 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.)

Robert D. Loveall

Typed or printed name of signer

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TALLAHASSEE, FLORIDA

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