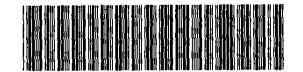
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(Do	cument Number)	
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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Anchor Watch Management & Training 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:

Russell Paret	
Name of Person	
Firm/Company	
100 Severn Ave Ste 103	And a
Address	- 17 & R
Annapolis, MD 21403	A\$ 7
City/State and Zip Code	Tries _
dct_russell@yahoo.com	TI E SUL
E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	
Russell Paret .443 . 994-9146	
at (1 + 0) 00 + 0 1 + 0	
Name of Person Area Code & Daytime Telephone Num	iber ·
Enclosed is a check for the following amount:	
	Filing Fee, ate of Status &
• •	ed Copy
(addition	al 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 FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Anchor Watch Management & Training 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 Company is:

Principal Office Address:	Mailing Address:
1395 Brickell Avenue, Suite 800	1395 Brickeil Avenue, Suite 800
Miami, FL 33131	Miami, FL 33131
ARTICLE III - Registered Agent, Registere (The Limited Liability Company cannot serve as its own Registusiness entity with an active Florida registration.) The name and the Florida street address of the Russell Paret	registered agent are:
Name	
1395 Brickell Ave	enue, Suite 800
Florida street ac	ddress (P.O. Box NOT acceptable)
Miami	FL 33131
City, S	State, and 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 (REQUIRED)

(CONTINUED)

Page 1 of 2

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:
MGRM	Russell Paret
	100 Severn Ave Ste 103
	Annapolis, MD 21403
 	
Use attachment if necessary)	
•	A Language Cotobor Oth 2012
ective date is listed, the date mus	the date of filing: October 9th 2012 (OP st be specific and cannot be more than five busing
days after the date of filing.)	

(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. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)

Signature of a member or an authorized representative of a member.

Russell Paret

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)