Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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Division of Corporations

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From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC

Account Number : I20000000019 : (305)552-5973

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

Ema:	i 7	Address	

FLORIDA LIMITED LIABILITY CO. RELENTLESS BOATS, LLC

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EXAMINER

Electronic Filing Menu Corporate Filing Menu

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:
The name of the Limited Liability Company is:
Relentless Boats, 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 Companysis:
Principal Office Address: Mailing Address:
7640 nw 36 Aue P.O. Box 8360112
Miami F1 3314D Miami F1 33283 ?
ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: (The Limited Liability Company cannot serve as its own Registered Agent, You must designate an individual or another business entity with an active Florida registration.)
The name and the Florida street address of the registered agent are: Consistent Sea Enterphises, Inc. Name
7640 nw 36th Aue
Florida street address (P.O. Box NOT acceptable) FL 33/47 City, 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 tosition as fegislered agent as provided for in Chapter 608, F.S.

Registered Agent's Signature (REQUIRED

(CONTINUED) Page 1 of 2

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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 iterpreisextic (Use attachment if necessary) (OPTIONAL) ARTICLE V: Effective date, if other than the date of filing: (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 SIGNA 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 penjury that the facts stated herein are true.)

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)

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Typed or printed name of signee