## L12000161349

(Re	questor's Name)	
. (Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	: #)
PICK-UP	MAIT WAIT	MAIL.
, (Bu	siness Entity Nam	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
,		





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Effective Date 01/01/13

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PILED
2012 DEC 26 PM 2: 4:
SECRETARY OF STATE

J. BRYAN

DEC 28 2012

EXAMINED

(850) 245-6051.

## **COVER LETTER**

TO:	Registration Division of C			
SUBJI	ECT:		RINE LLC. led Liability Company	
The en	closed Articles	of Organization and fee(s) are	submitted for filing.	
Please	return all corres	pondence concerning this matt	ter to the following:	
		MARTIN A.	HART Name of Person	
		AMH MARINE		
	/		Firm/Company  — DR  Address	2012 DEI SECRE TALLA
				26 PR
-	,	Cit  MHART 3 © T  E-mail address: (10 be used	RIDA 33776  y/State and Zip Code  Ampabay. RR. Com for future annual report notification)	77.0
For fur	ther information	concerning this matter, please	call:	
_/	MARTIN Name	A HART of Person	_at ( <u>727</u> ) <u>458-</u> Area Code & Daytime Tele	8783 phone Number
Enclos	ed is a check f	or the following amount:		
⊒\$125.	00 Filing Fee		□\$155.00 Filing Fee & 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 C	3

Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY	7
ARTICLE I - Name: The name of the Limited Liability Company is:	414
AMH MARINE LLC,  (Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")	' ج
ARTICLE II - Address:  The mailing address and street address of the principal office of the Limited Liability Company is	ۍ ::
Principal Office Address:  Mailing Address:	
13076 FOREST DR. 13076 FOREST DR. SEMINOLE, FL 33776 SEMINOLE, FL 33776	
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.)  Effective Date 0/01/13	2
The name and the Florida street address of the registered agent are:	,
MARTIN A. HART  Name	
13076 FOREST DR.  Florida street address (P.O. Box NOT acceptable)	
SEMINOIE FL 33776  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 position as registered agent as provided for in Chapter 608, F.S..

Registered Agent's Signature (REQUIRED)

(CONTINUED)

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:

"MGR" = Manager "MGRM" = Managing Member		MINDEC 28
MGRM	MARTIN A. HART	Dr. CEL
	SEMINOLE, FZ. 3	
		<del></del>
(Use attachment if necessary)		
ffective date is listed, the date mu	ne date of filing: 1-1-2013 st be specific and cannot be more t	(OPTIONAL than five business
or 90 days after the date of filing.)		

/ 5

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. 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.)

MARTIN A. HART

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)