

Division of Corporations

Page 1 of 1

L130000183283

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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.

(((H13000018328 3)))



H130000183283ABC-

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

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

From:

Account Name : DAVID R. CARTER, P.A.
Account Number : I20010000053
Phone : (352) 686-6278
Fax Number : (352) 686-7324

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

Email Address:

LC@DAVIDRCARTER.COM

RECEIVED
13 JAN 24 AM 10:38
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**FLORIDA LIMITED LIABILITY CO.
AM COMMERCIAL DIVING, LLC**

Certificate of Status	0
Certified Copy	1
Page Count	02
Estimated Charge	\$155.00

FILED
2013 JAN 24 AM 9:03
SECRETARY OF STATE
TALLAHASSEE, FL.

Electronic Filing Menu

Corporate Filing Menu

Help

JAN 25 2013

D. BRUCE

**ARTICLES OF ORGANIZATION
FOR
AM COMMERCIAL DIVING, LLC**

ARTICLE I - NAME

The name of the Limited Liability Company is **AM COMMERCIAL DIVING, 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:
11945 Darwin Avenue New Port Richey, Florida 34654	50 Hamilton Grove Drive Pooler, Georgia 31322

ARTICLE III - REGISTERED AGENT

The name and the Florida street address of the Registered Agent is Linda Collins, 11945 Darwin Avenue, New Port Richey, Florida 34654.

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, Florida Statutes.


Linda Collins, Registered Agent

SECRETARY OF
TALLAHASSEE

2013 JAN 24 AM 9:03

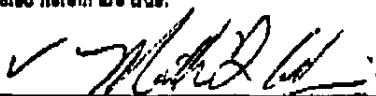
FILED

ARTICLE IV - MANAGEMENT

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

Name and Address:	Title (MGR = Manager; MORM = Managing Member)
Matthew D. Collins 50 Hamilton Grove Drive Pooler, Georgia 31322	Managing Member
Sarah E. Collins 50 Hamilton Grove Drive Pooler, Georgia 31322	Managing 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.


Matthew D. Collins, Managing Member

Dated: January 21, 2013

SECRETARY OF STATE
TREASURER
FLORIDA

2013 JAN 24 AM 9:03

FILED