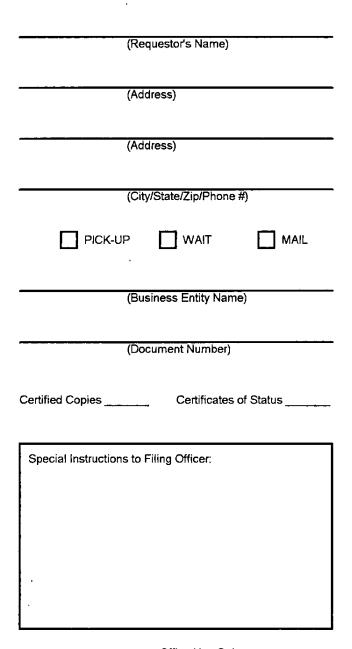
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SECNOTARY OF STATE
TALL ALIASSEE FLOOR

N. Culligan MAR 2 6 2013

COVER LETTER

TO:

Registration Section
Division of Corporations

SUBJECT: Southern Dippers Hydrographics Just Dip It

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:

Jerry W Moore Name of Person Southern Dippers Hydrographics Just Dip It Firm/Company 3740 NE 40THPL UNIT G Address OCALA, FL 34479 City/State and Zip Code southerndippershydrographics@yahoo.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Jerry Moore

352

812-6814

Name of Person

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

□\$125.00 Filing Fee

\$130.00 Filing Fee & Certificate of Status

□\$155.00 Filing Fee & Certified Copy (additional copy is enclosed)

□ \$160.00 Filing Fee, Certificate of Status & 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 Circle
Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:	,
The name of the Limited Liability Compar	ny is:
Southern Dippers Hydrographics Just Dip It "LLC" (Must end with the words "Limited")	d Liability Company, "L.L.C.," or "LLC.")
	, and, ov., p. 1, 2, 2, 3, 3, 3, 3, 3, 3, 3, 3, 3, 3, 3, 3, 3,
ARTICLE II - Address: The mailing address and street address of the mailing address and street address and street address and street address and street address address and street address and street address and street address address address and street address address and street	the principal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
3740 NE 40TH PL UNIT G	3740 NE 40TH PL UNIT G
OCALA, FL 34479	OCALA, FL 34479
business entity with an active Florida registration.) The name and the Florida street address of Jerry W Moore	f the registered agent are: Name SECRETARY AND S
	Name
3740 NE 40TH PL UNIT G	155E
Florida str	reet address (P.O. Box NOT acceptable)
OCALA	FL 34479
C	City, State, and Zip
liability company at the place designate registered agent and agree to act in this c all statutes relating to the proper and co	nd to accept service of process for the above stated limited ed in this certificate, I hereby accept the appointment as capacity. I further agree to comply with the provisions of emplete performance of my duties, and I am familiar with 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):

* 1 4 🚡

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

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:
MGR	JERRY W MOORE
	3740 NE 40TH PL UNIT G
	OCALA, FL 34479
4h	
	
· ·	
(Use attachment if necessary)	
ARTICLE V: Effective date, if other than	the date of filing: (OPTIONAL)
	nust be specific and cannot be more than five business days
prior to or 30 days after the date of film	§• <i>)</i>
REQUIRED SIGNATURE:	
	Ther or an authorized representative of a member
Signature of a me	mber or an authorized representative of a member.
constitutes an affirmation u I am aware that any false ir	a 608.408(3), Florida Statutes, the execution of this document of the penalties of perjury that the facts stated herein are true of state of the penalties of perjury that the facts stated herein are true of state of the penalties of perjury that the facts stated herein are true of state of the penalties of perjury that the facts stated herein are true of state of the penalties of perjury that the facts stated herein are true of state of the penalties of perjury that the facts stated herein are true of state of the penalties of perjury that the facts stated herein are true of state of the penalties of perjury that the facts stated herein are true of state of the penalties of perjury that the facts stated herein are true of state of the penalties of perjury that the facts stated herein are true of state of the penalties of perjury that the facts stated herein are true of state of the penalties of penalti
JERRY W MOORE	38 38 38 38 38 38 38 38 38 38 38 38 38 3
	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)