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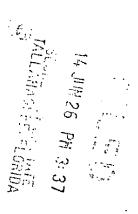
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## **COVER LETTER**

TO:

Registration Section

Division of C	orporations		
SUBJECT: 2Shark	S Marine Solutions L.L.C. Name of Lin	nited Liability Company	·
The enclosed Articles	of Organization and fee(s) as	re submitted for filing.	
Please return all corre	spondence concerning this m	atter to the following:	
Douglas	F, Qusley	Name of Person	
2SharkS	Marine Solutions, L.L.C.	Firm/Company	
4905 34t	h St S #289	Address	
St Peters	burg. Florida 33711 C	City/State and Zip Code	
2sharks@gmail	.com E-mail address: (to be use	d for future annual report notifica	ition)
For further information	n concerning this matter, plea	ase call:	
<u>Douglas F. Ousley</u> Nan	at ( )		ephone Number
Enclosed is a check fo	r the following amount:		
- ☐ \$125.00 Filing Fee	S130.00 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)
Mai	ling Address	Street/Courier Addi	ress

Mailing Address
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

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:	
2SharkS Marine Solutions, L.L.C. (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 of	ffice of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
4905 34th St S #289	4905 34th St S #289
St Petersburg, FL 33711	St Petersburg, FL 33711
ARTICLE III - Registered Agent, Registered Office, & (The Limited Liability Company cannot serve as its own another business entity with an active Florida registration.)  The name and the Florida street address of the registered.	Registered Agent. You must designate an individual or n.)
Douglas F. Ousley	
Name Name	
4801 37th St S Florida street address (P.O. Box	NOT acceptable)
St Petersburg	FL 33711
City	Zip
the place designated in this certificate, I hereby accept capacity. I further agree to comply with the provisions of of my duties, and I am familiar with and accept the obt	ED)

Title: "AMBR" = Authorized Member	Name and Address:
"MGR" = Manager AMBR	Douglas F. Ousley
	4905 34th St S #289 St Petersburg, FL 33711
	<del></del>
EV: Effective date, if other than the date ective date is listed, the date must be spot filing.)	e of filing: (OPTIONAL) secific and cannot be more than five business days prior to or 90 d
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