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Special Instructions to	Filing Officer:	
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COVER LETTER

~	ion Section of Corporations		·
SUBJECT:	BEST MARINE	PRODUCTS, L.L.C.	
	Name of Lin	nited Liability Company	
The enclosed Artic	les of Organization and fee(s) as	re submitted for filing.	
Please return all co	rrespondence concerning this m	atter to the following:	
	Michael K.	Padgett Name & Barran	
		Name of Person	<u> </u>
	REST MARINE	PRODUCTS L.L.C.	
<u> </u>		Firm/Company	
	18689 SW	103 Court	. 1
		Address	
	Minni Fh	Address 33157 City/State and Zip Code CS Machinery . Com d for future annual report notification ase call:	
		Sity/State and Zip Code	
	michaelp @ ic	cs muchinery. com	
	E-mail address: (to be use	d for future annual report notification	5 5
For further informa	ation concerning this matter, plea	ase call:	ान ५
Michael	1 K. Padjett at (305 <u>495-0982</u> Area Code Daytime Teleph	
7	Vame of Person	Area Code Daytime Teleph	one Number
Enclosed is a check	c for the following amount:		
\$125.00 Filing Fee	e \$\Bigcup\\$130.00 Filing Fee & Certificate of Status	Certified Copy (additional copy is enclosed)	\$160.00 Filing Fee, Certificate of Status & Certified Copy dditional copy is enclosed)
F	Mailing Address Registration Section Division of Corporations	Street/Courier Address Registration Section Division of Corporations	

Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

P.O. Box 6327 Tallahassee, FL 32314

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

AR	ľ	CL	ΕI	-	N:	am	e:	

The name of the Limited Liability Company is:

BEST MARINE PRODUCTS, 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 office of the Limited Liability Company is:

Principal Office Address:

Mailing Address:

18689 SW 103 COURT MIANI, FL. 33157

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:

Stephen A. Alger, Esq. 7600 Sw 57 Avenue - Suite 224
Florida street address (P.O. Box NOT acceptable)

Miami FL 33/43
City 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 605, F.S..

(CONTINUED)

Page 1 of 2

<u>Title:</u>	Name and Address:
"AMBR" = Authorized Member	
"MGR" = Manager	m 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
MGR	Michael K. Padgett 17810 Cutter tourt
	Migni FL 33189
	MIAMI, PC 33187
MGR	Darrel K Palant
	Darrel K. Padgett 19635 Lenaire Drive
	Miami, FL 33157

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(Use attachment if necessary)	
ective date is listed, the date mus	the date of filing: (OPTIONAL) It be specific and cannot be more than five business days prior to or
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E V: Effective date, if other than tective date is listed, the date must of filing.)	the date of filing: (OPTIONAL) it be specific and cannot be more than five business days prior to or
E V: Effective date, if other than the ective date is listed, the date must of filing.) E VI: Other provisions, if any. REQUIRED SIGNATURE:	at be specific and cannot be more than five business days prior to or
E V: Effective date, if other than the ective date is listed, the date must of filing.) E VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of the coordance with second content of the coordance with second content.	of a member or an authorized representative of a member.
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E V: Effective date, if other than the ective date is listed, the date must of filing.) E VI: Other provisions, if any. REQUIRED SIGNATURE: Signature (In accordance with sections an affirmation of the economic of the e	of a member or an authorized representative of a member. ction 605.0203 (1) (b), Florida Statutes, the execution of this document on under the penalties of perjury that the facts stated herein are true. See information submitted in a document to the Department of State
E V: Effective date, if other than the ective date is listed, the date must of filing.) E VI: Other provisions, if any. REQUIRED SIGNATURE: Signature (In accordance with sections an affirmation of the economic of the e	of a member or an authorized representative of a member. ction 605.0203 (1) (b), Florida Statutes, the execution of this document on under the penalties of perjury 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)

ARTICLE IV-

\$ 5.00 Certificate of Status (Optional)

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