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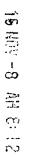
(Re	equestor's Name)	
(Ac	ddress)	
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PICK-UP	☐ WAIT	MAIL
(Ви	usiness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	Certificates	of Status
Special Instructions to	Filing Officer:	

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10/14/16--01023--014 **160.00



TO: Registration Section Division of Corporations
SUBJECT: 7 Seas Resources Group 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:
Joshua S. Hecht
7 Seas Resources Group
1137 NE 30 Avenue
Fort hauderdale F-L. 33304 City/State and Zip Code 7 Seas resource group & ghail. com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
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 Certified Copy (additional copy is enclosed) \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing AddressStreet AddressNew Filing SectionNew Filing Section

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

Division of Corporations

2661 Executive Center Circle Tallahassee, FL 32301

Clifton Building

COVER LETTER

Attn: Jessica Fason Ref #: W160000 707 29 15 1111-0 11111-01

Thank You!!

P.S. - You already have my check, if there are any issues, Please call me - 954-232-7737

Alberton

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE	l - Name:
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The name of the Limited Liability Company is:

7 Seas Resources Group LLC.

(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:
FORT LANDERBURGELE, 30304	Fort Lauderdate, FL. 33304

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:

Name

Name

1137 NE 32 Avenue

Florida street address (P.O. Box NOT acceptable)

Ft. Lauderdale FL \$33304

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

Registered Agent's Signature (REQUIRED)

16 NEV -8 AM 6: 12

Title: "AMBR" = Authorized Member "MGR" = Manager	Name and Address:
AMBR	Joshua Hecht 1137 NE 3 = Avenue Fort Landerdale, El 33304
MGR	(reg Smith 11791 Windsor Bay PL. Wellington, FL 33449
EV: Effective date, if other than t	he date of filing: (OPTIONAL)
EV: Effective date, if other than the ctive date is listed, the date must of filing.) The date inserted in this block does nent's effective date on the Department.	t be specific and cannot be more than five business days prior to or 90 des not meet the applicable statutory filing requirements, this date will not be
ective date is listed, the date must of filing.) The date inserted in this block document's effective date on the Depa E VI: Other provisions, if any. REOUIRED SIGNATURE: This document is I am aware that a constitutes a thire	t be specific and cannot be more than five business days prior to or 90 des not meet the applicable statutory filing requirements, this date will not be

Page 2 of 2