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To:

Division of Corporations

Fax Number : (850) 617-6383

From:

Account Name : AGENTS AND CORPORATIONS, INC

Account Number : I20010000112 Phone : (302) 575-0875

Fax Number : (302)575~1642

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

Email	Address:			

FLORIDA LIMITED LIABILITY CO. HIDDEN HARBOUR ENGINEERING LLC

Certificate of Status	0		
Certified Copy	0		
Page Count	02		
Estimated Charge	\$125.00		

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

HIDDEN HARBOUR ENGINEERING 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:

510 Nettles Blvd, Jonsen Beach # 34957

2161 Cane Ridge Road, Paris Ky 40361

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:

AGENTS AND CORPORATIONS, INC.

300 FIFTH AVENUE SOUTH SUITE 101-330

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

NAPLES

FL

34102

City

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.,

Agents and Corporations, Inc.

Registered Agent's Signature (Required)

John L. Williams, President

(CONTINUED)

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Title:

"AMBR" = Authorized Member

"MCP" = 15

"MGR" = Manager

James Molloy, 2161 Cane Ridge Road, Paris Ky 40361

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing:

. (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of liling.)

ARTICLE VI: Other provisions, if any.



REQUIRED SIGNATURE:

Signature of a member or an authorized representative of a member. (In accordance with section 605.0203 (1) (b), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)

Filing Fccs:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)