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19 OCT -8 PH 2: 45

## COVER LETTER

	New Filing Section Division of Corporations	19 OCT -8 PM 2
SUBJEC	T: Ottana Madite Manne, LLC.  Name of Limited Liability Company	
The enclo	osed Articles of Organization and fee(s) are submitted for filing.	
Please ret	turn all correspondence concerning this matter to the following:	
	Randolph S Daniel	
	Name of Person	
	Ottana Mebile Manne, Lle	<u>(</u>
	8476 WIST CCURT DE	<del></del>
	Address	
	Verc Beach, Florage 329 City/State and Zip Code rardy of & graw. com	<u>li 7</u>
	City(State and Zip Code  Varydur) & Garvard. CUM	
	E-mail address: (to be used for future annual report notification)	<del></del>
For further	information concerning this matter, please call:	
	Randy Daniel at 772 Teb-9893  Name of Person Area Code Daytime Telephone Num	ber
Enclosed	is a check for the following amount:	
<b>]\$</b> 125.001	(additional copy is enclosed) Ce	60.00 Filing Fee. ertificate of Status & ertified Copy itional copy is enclosed)
	Mailing AddressStreet AddressNew Filing SectionNew Filing SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton Building	

Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

Tallahassee, FL 32314

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:  OHANA MODILE MARINE, LLC. 13 CCT - 8 FH 2: \$4  (Must contain the words "Limited Liability Company, "L.L.C.," or "LLC.")
Ottana Mobile Marine, LLC. 1800.
(Must contain 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:
8476 JUIST COUFT Same
verv neath, francia
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:
<u> Randolph Duniel</u>
Name
8476 101ST Court
Florida street address (P.O. Box NOT acceptable)
vero beach, FL 32967
City State Zip
laving 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 amiliar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S  Registered Agent's Signature (REQUIRED)

(CONTINUED)

Title: "AMBR" = Authorized Member "MGR" = Manager	thorized to manage and control the Limited Liability Company:  Name and Address:  19 057 - 8 PH 2: \$8
NA	
<del></del>	
(Use attachment if necessary)	
i effective date is listed, the date must be sp ate of filing.)	of filing:
ICLE VI: Other provisions, if any.	
REQUIRED SIGNATURE:	alound Daniel
Ka	()(((((((((((((((((((((((((((((((((((((
This document is execu I am aware that any fals constitutes a third degre	ember or an authorized representative of a member, ed in accordance with section 605.0203 (1) (b), Florida Statutes, information submitted in a document to the Department of State felony as provided for in s.817.155, F.S.

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)

## COVER LETTER

	6	COVER LETTER	13 OCT -8 PH 2: 66
	w Filing Section vision of Corporations		13 007 -8 '''
SUBJECT:	CHEING M Name of	Chi He Mailie Li ( Limited Liability Company	1
The enclose	d Articles of Organization and feets)	are submitted for filing.	
Please retur	n all correspondence concerning this	matter to the following:	
	Rande	lph s Daniel	
		Name of Person	
	Ottana	MULTIPE MULTIPE, L	lĈ.
	8476 juist	CCURT PE	
		Address	<del></del>
	Verc Br	ach, Flinda 3º	2967
_	E-mail address: (to be us	City(State and Zip Code UCL & C GNVUL. City sector future annual report notification	77
For further in	formation concerning this matter, ple	rase call:	
	Randy Daniel at	Area Code Daytime Telephone	3 Number
Enclosed is	a check for the following amount:		
]\$125.00 Fil	ing Fee S130.00 Filing Fee & Certificate of Status	Certified Copy (additional copy is enclosed)	S160.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Address New Filing Section Division of Corporations P.O. Box 6327	Street Address  New Filing Section  Division of Corporation  Clifton Building	18

2661 Executive Center Circle Tallahassee, FL 32301

P.O. Box 6327 Tallahassee, FL 32314