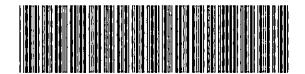
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| Certified Copies | Certificates | s of Status |
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| Special Instructions to Fi | iling Officer: | |
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Office Use Only



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COVER LETTER

| | vision of | Section Corporations | | | |
|----------------------|---|---|-------------------|---|--|
| CUD IDOT | | Sport Marine LLC | | | |
| SUBJECT: | | Name | of Limited Liab | oility Company | |
| The enclose | ed Articles | s of Organization and fee | e(s) are submitte | ed for filing. | |
| Please retur | n all corre | spondence concerning t | his matter to the | e following: | |
| | Jennifer | R Smith | | | |
| | · · | | Name o | of Person | |
| | Penguin | Marine LLC | | | |
| | | | Firm/C | Company | |
| | 4920 W | San Rafael St | | | |
| | | | Ado | dress | |
| | Tampa, | FL 33629 | | | |
| | lennifer | bondi@yahoo.com | City/State a | and Zip Code | |
| _ | | | e used for future | e annual report notifica | ition) |
| For further in | ıformatior | concerning this matter, | please call: | | |
| | Jennifer I | | 813 at (| 340-2759 | |
| - | N | Name of Person | | Daytime Telepho | |
| Enclosed is | a check fo | or the following amount: | : | | |
| \$ 125.00 Fil | | \$130.00 Filing Fee Certificate of State | e & S155 | 5.00 Filing Fee & Ified Copy onal copy is enclosed) | \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed) |
| | | ailing Address | | Street Address | |
| | | w Filing Section vision of Corporations | | New Filing Section Division of Corpora | tions |
| | P.C | D. Box 6327 | | Clifton Building | |
| | Tallahassee, Fl. 32314 2661 Executive Center Circle | | ter Circle | | |

Tallahassee, FL 32301

ARTICLES OF ORCANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

| Aqua-Sport Marine | LLC | | | |
|--|---|--|---|--|
| (Must | contain the words "Limited L | iability Company. | "L.L.C.," or "LLC.") | |
| RTICLE II - Address: | | | | |
| he mailing address and str | eet address of the principal of | Tice of the Limited | Liability Company is: | |
| <u>Pri</u> | Principal Office Address: | | Mailing Address: | |
| 12781 Kingfish Drive | | 4920 | 4920 W San Rafael St | |
| Tressure Island, FL | . 33706, USA | Tamp | Tampa, FL 33629 USA | |
| The Limited Liability Com | | Registered Agent. | nt's Signature: You must designate an individual o | |
| The Limited Liability Com nother business entity with | pany cannot serve as its own an active Florida registration reet address of the registered | Registered Agent. ' n.) | | |
| The Limited Liability Com nother business entity with | pany cannot serve as its own nan active Florida registration | Registered Agent. `n.) agent are: | | |
| The Limited Liability Com nother business entity with | pany cannot serve as its own an active Florida registration reet address of the registered | Registered Agent. ' n.) | | |
| The Limited Liability Com nother business entity with | pany cannot serve as its own an active Florida registration reet address of the registered | Registered Agent. `n.) agent are: | | |
| The Limited Liability Com nother business entity with | pany cannot serve as its own nan active Florida registration reet address of the registered Penguin Marine LLC | Registered Agent. 'n.) agent are: Name | You must designate an individual o | |
| The Limited Liability Com nother business entity with | pany cannot serve as its own nan active Florida registration reet address of the registered Penguin Marine LLC 4920 W San Rafael St | Registered Agent. 'n.) agent are: Name | You must designate an individual o | |

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..

Registered Agent's Signature (REQUIRED)

(CONTINUED)

1900115 PH 2003

 ${\tt as}$

| <u>Title:</u> | Name and Address: |
|---|---|
| "AMBR" = Authorized Member | |
| "MGR" = Manager | |
| MGR | Jennifer R Smith |
| | 4920 W. San Rafael St |
| | Tamps, FL 33629 |
| MGR | Livingston T Smith II |
| | 4920 W San Rafael St |
| | Tampa, FL 33629 |
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| (Use attachment if necessary) | |
| • | |
| ${ m LEV}$: Effective date, if other than the date | te of filing: (OPTIONAL) |
| ffective date is listed, the date must be s | pecific and cannot be more than five business days prior to or 90 days af |
| e of filing.) | |
| If the date inserted in this block does not | meet the applicable statutory filing requirements, this date will not be lister |
| cument's effective date on the Departmen | it of State's records. |
| | |
| CLE VI: Other provisions, if any. | |
| ort Marine LLC was formed to be a marine dealer | and service center. |
| · | |
| | |

Jennifer R Smith

constitutes a third degree felony as provided for in s.817.155, F.S.

Typed or printed name of signee

Signature of a member or an authorized representative of a member. This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware that any false information submitted in a document to the Department of State

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)