L210000 80828

(Rec	questor's Name)	
(Add	dress)	
(Add	dress)	
(City	//State/Zip/Phone	e #)
PICK-UP	MAIT	MAIL
(Bus	siness Entity Nan	ne)
(Doc	cument Number)	
Certified Copies	Certificates	of Status
Special Instructions to f	Filing Officer:	
		-

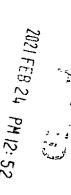
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CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 + Tallahassee, Florida 32301 (850) 224-8870 + 1-800-342-8062 + Fax (850) 222-1222

eaduction Marine LLC		
		Art of Inc. File
		LTD Partnership File
		Foreign Corp. File
	ŀ	L.C. File
		Fictitious Name File
		Trade/Service Mark
		Merger File
	ļ	Art. of Amend. File
		RA Resignation
		Dissolution / Withdrawal
		Annual Report / Reinstatement
		Cert. Copy
		Photo Copy
		Certificate of Good Standing
		Certificate of Status
	i	Certificate of Fictitious Name
		Corp Record Search
		Officer Search
	1	Fictitious Search
nature		Ficutious Owner Search
		Vehicle Search
		Driving Record
uested by: SETH		UCC 1 or 3 File
ne Date	Time	UCC 11 Search
	'	UCC 11 Retrieval
K-In Will Pick Up	·	Courier

COVER LETTER

TO:	New Filing Section Division of Corpo					
SUBJE	SeaDuction	Marine LLC				
3000		Name	of Limited Lia	bility Company	·	
The end	closed Articles of O	ganization and fe	e(s) are submit	ted for filing.		
Please	return all correspond	lence concerning	this matter to tl	ne following:		
	ANDRES VAL	DANO				
			Name	of Person		
			Firm	Company (Company		
	1080 BRICKE	LL AVE, APT 1		Company		
			A	ddress		
	MIAMI, FL 33	131				
	AVALDANO@N	ME.COM	City/State	and Zip Code		
	E-n	nail address: (to b	e used for futu	re annual report notificat	ion)	
For furth	er information conce	rning this matter	, please call:			
	ANDRES VALI		305 _at (213-2204		
	Name o	f Person		: Daytime Telephon	ne Number	
Enclose	ed is a check for the	following amount	:			
■\$125		□\$130.00 Filing Certificate of Sta	tus Cer	155.00 Filing Fee & tified Copy onal copy is enclosed)	☐\$160.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)	
	Mailing /			Street Address		
	New Filin	g Section of Corporations		New Filing Section Division The Centre of Tallahassee		
	P.O. Box			2415 N. Monroe Stre		
		ee, FL 32314		Tallahassee, FL 3230		

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the Limited Liability C	ompany is:		
SeaDuction Marine LL			
(Must contain	the words "Limited	Liability Con	npany, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street addre	ess of the principal of	office of the L	limited Liability Company is:
Principal (Office Address:		Mailing Address:
1080 BRICKELL AVE. MIAMI, FL 33131	APT 1409	<u>. </u>	SAME
ARTICLE III - Registered Agent, (The Limited Liability Company car another business entity with an active The name and the Florida street additional active and the Florida street additional active a	nnot serve as its own ve Florida registration	n Registered A on.)	d Agent's Signature: Agent. You must designate an individual or
<u> </u>	NDRES VALDAN	10	
		Name	
<u>1</u>	080 BRICKELL A	VE, APT 140	09
	Florida street addres		
<u>M</u>	HAMI	FL	33131
	City	State	Zip
place designated in this certificate. I he further agree to comply with the provis	ereby accept the app sions of all statutes r stions of my position	oointment as revelating to the passes as registered with the passe	for the above stated limited liability company at the egistered agent and agree to act in this capacity. proper and complete performance of my duties, a agent as provided for in Chapter 605, F.S
	Regist	tered Agent's	Signature (REQUIRED)
		(CONTINU	

(CONTINUED)

ARTICLE IV-

The name and address of each person authorized to manage and control the Limited Liability Company:

Title: "AMBR" = Authorized Member "MGR" = Manager	Name and Address:	
MGR	ANDRES VALDANO 1080 BRICKELL AVE, AP MIAMI, FL 33131	T 1409
		
(Use attachment if necessary)		
ARTICLE V: Effective date, if other than the date (If an effective date is listed, the date must be spetthe date of filing.) Note: If the date inserted in this block does not not the document's effective date on the Department.	ecific and cannot be more than to neet the applicable statutory filing	ive business days prior to or 90 days after
ARTICLE VI: Other provisions, if any.		
REQUIRED SIGNATURE:	(Tich)	
Signature of a me	mber or an authorized represe	ntative 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 constitutes a third degree felony as provided for in s.817.155. F.S.

ANDRES VALDANO

Typed or printed name of signee

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)