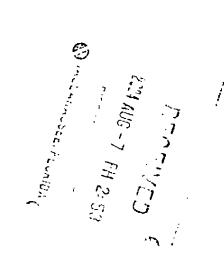
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(	Requestor's Name)
(	Address)
(.	Address)
(	City/State/Zip/Phone #)
PICK-UP	WAIT MAIL
(	Business Entity Name)
(	Document Number)
Certified Copies	Certificates of Status
Special Instructions to F	iling Officer:

Office Use Only



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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

Hat77 Marine LLC	— <sub> </sub>
Please Debit FCA000000003 For: 125	
Thank you Seth Neeley	
Stof/	Art of Inc. File
	LTD Partnership File
	Foreign Corp. File
	L.C. File
	Fictitious Name File
	Trade/Service Mark
	Merger File
	Art, of Amend, File
	RA Resignation
	Dissolution / Withdrawal
	Annual Report / Reinstatement
	Cert. Copy
	Photo Copy
	Certificate of Good Standing
	Certificate of Status
	Certificate of Fictitious Name
	Corp Record Search
/ .	Officer Search
	Fictitious Search
Signature	Fictitious Owner Search
	Vehicle Search
	Driving Record
Requested by:	UCC 1 or 3 File
Name Data Time	UCC 11 Search
Name Date Time	UCC 11 Retrieval

#### COVER LETTER

то:	New Filing Section Division of Corporations		
SUBJE			
	Name of I	imited Liability Company	
The en	closed Articles of Organization and fee(s)	are submitted for filing.	
Please	return all correspondence concerning this i	natter to the following:	
	Vladislav Yampolsky		
		Name of Person	
		Firm/Company	
	332 Plaza Real		
		Address	
	Boca Raton, FL 33432		
	bobby@ecjusa.eom	City/State and Zip Code	
	E-mail address: (to be use	ed for future annual report notificat	ion)
For furth	er information concerning this matter, plea	se call:	
	Vladislav Yampolsky at (	954 ) 224-7500	
	Name of Person	Area Code Daytime Telephon	e Number
Enclose	ed is a check for the following amount:		
■\$125	6.00 Filing Fee	&  \$\Bigsis \\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$	☐\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Address New Filing Section	Street Address New Filing Section Di	ivision
	Division of Corporations P.O. Box 6327	The Centre of Tallaha 2415 N. Monroe Stree	issee

Tallahassee, FL 32303

Tallahassee, FL 32314

#### AKTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability	y Company is:			
Hat77 Marine LLC		1:11		
(Must conta	ain the words "Limited Li	ability Com	pany, "L.L.C.," or "LLC.")	
ARTICLE II - Address: The mailing address and street ac	ddress of the principal offi	ce of the L	mited Liability Company is:	
<u>Principa</u>	al Office Address:		Mailing Addres	<u>is</u> :
332 Piaza Real			332 Plaza Real	
Boca Raton, FL 3343	2	<b>—</b>	Boca Raton, FL 33432	
ARTICLE III - Registered Age (The Limited Liability Company another business entity with an a	cannot serve as its own R	egistered A	I Agent's Signature: gent. You must designate an indiv	idual or
The name and the Florida street a	nddress of the registered a	gent are:		
	Vladislav Yampolsky			
	}	Vame		
	332 Plaza Real			
	Florida street address (	P.O. Box N	OT acceptable)	
	Boca Raton	FL.	33432	
	City	State	Zip	

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 postion as registered agent as avorted for in Chapter 605, F.S..

Registered Agent's Signature (REQUIRED)

(CONTINUED)

### ARTICLE IV-

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

See attachment if necessary)  V: Effective date, if other than the date of filing:	AMBR" = Authorized Member		
ise attachment if necessary)  V: Effective date, if other than the date of filing:  (OPTIONAL)  ive date is listed, the date must be specific and cannot be more than five business days prior to or 90 educe in this block does not meet the applicable statutory filing requirements, this date will not not a effective date on the Department of State's records.  VI: Other provisions, if any.  EOURED SIGNATURE:  Signature of a member or an authorized representative of a member.  This document is executed in accordance with section 605.020 of 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 1.817.155, F.S.  Vladislav Yampolsky  Typed or printed name of signee  Filing Fees:  125.00 Filing Fee for Articles of Organization and Designation of Registered Agent	MGR" = Manager		
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