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Acknowledgement

W. P. Verifyer

DCC

DUC

<u>cs</u> c -	THE UNITED STATES CORPORATION	
	ACCOUNT NO. : 07210000003	2
	REFERENCE : 841700 71	55700
	AUTHORIZATION: latricia	1 march
•	COST LIMIT : \$ 285.00	//)
	ORDER DATE : June 2, 1998	
	ORDER TIME : 9:21 AM	
	ORDER NO: 841700-005	
	CUSTOMER NO: 7155700	
	CUSTOMER:Mr. Albert C. Montante MR. ALBERT C. MONTANTE	سنا که رسی این وجه چر منتوانید پایترانید این این در این این
	7160 Challenger Drive	1000025474015
	Titusville, FL 32780	1. of 12 mil
	DOMESTIC FILING	100
	NAME: DESTINATION BOUND MARII TRANSPORT & SERVICES, I	46C
	EFFECTIVE DATE:	Document Examiner Updater
	ARTICLES OF INCORPORATION CERTIFICATE OF LIMITED PARTNERSHIP	Updater DA Verifyer
	PLEASE RETURN THE FOLLOWING AS PROOF OF	FACKrithWedgement 2 5 3
Name Availab ility	CERTIFIED COPY XX PLAIN STAMPED COPY CERTIFICATE OF GOOD STANDING	Updater Verifyer EACK-ICM Gedgement W. P. Verifyer S INITIALS:
ेocumen t Examiner	CONTACT PERSON: Jeanine Reynolds EXAMINER'S	e initials:
'-dater	DCC	
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FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

June 4, 1998

JEANINE REYNOLDS CSC TALLAHASSEE, FL

SUBJECT: DESTINATION BOUND MARINE TRANSPORT & SERVICES, LLC

Ref. Number: W98000012851

We have received your document for DESTINATION BOUND MARINE TRANSPORT & SERVICES, LLC and the authorization to debit your account in the amount of \$285.00. However, the document has not been filed and is being returned for the following:

The designation of the registered office and the registered agent, both at the same Florida street address, must be contained within the document pursuant to Florida Statutes. The registered agent must sign accepting the designation as required by Florida Statutes.

If you have any questions concerning the filing of your document, please call (850) 487-6020.

Letter Number: 298A00031612

Tammi Cline Document Specialist

ARTICLES OF ORGANIZATION

FOR T

FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I.

The name of the Limited Liability Company is:

_	Destination Bound Marine Transport & Services, LLC					
	ARTICLE II.					
The mailing address and physical street address of the principal office of the Limited Liability Company is:						
	471 Manor Dr Merritt Island FL 32952 RDA 8					
	ARTICLE III.					
The period of duration (number of years) of the Limited Liability Company shall be:						
	ARTICLE IV. (choose one)					
	The Limited Liability Company is to be managed by a manager or managers and the name(s) and address(es) of such manager(s) who is/are to serve as manager(s) is/are:					

Albert C Montante, 471 Maner Dr. Merritt Island Ed. 32952 19801-1151 (302)575-0440

AFFIDAVIT OF MEMBERSHIP AND CONTRIBUTIONS

The	undersigned member and authorized representative of a member of HOWT C MONTANTE deposes and says:		
1)	The above named Limited Liability Company has at least two members.	36	
2)	The total amount of cash contributed by the member(s) is \$\frac{4850}{4850}\$.	JUN -4	
3)	If any, the agreed value of property, other than cash contributed by the member(s) is \$ Provide an itemized description on a separate sheet.	AM 10: 50	M U
4)	The total amount of cash or property anticipated to be contributed by the member(s) is \$\\ \frac{\gamma 500.}{}\]. The total includes amount from #2 and #3 above.		

Signature of a member or authorized representative of a member.

(In accordance with Section 608.408(3), Florida Statutes, the execution of this affidavit constitutes an affirmation, under the penalties of perjury that the facts stated herein are true.)

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED

PURSUANT TO THE PROVISIONS OF SECTION 608.415 Or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name Of the limited liability Company is:	Destination	Bound	Marine	Transpo:	rt &	
Services, LLC.				SECI TALL	98	•
2. The name and address Of the registered agent and Office is: . Corporation Service Company					05 :01 NV 17 - NOT	FILED
	(NAME)		***			
1201 Hays Street			-			
(P. O. BO	X NOT ACCEPTA	ABLE)		-		
Tallahassee, Florida	32301					-
(Cr	ΓY/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 position as registered agent.

Welierah W. Skipper 6-17-98
(SIGNATURE) (DATE)

Filing Fee: \$ 35 for Designation of Registered Agent