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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

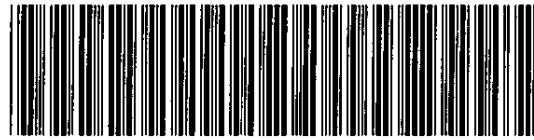
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

T. HAMPTON

JUN - 5 2008

EXAMINER

52952-8001

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Sophlex Gulf Shipping, LLC
(Name of Limited Liability Company)

The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida..

Please return all correspondence concerning this matter to the following:

Timothy Levensaler
(Name of Person)

Sophlex Gulf Shipping, LLC
(Firm/Company)

PO Box 542349
(Address)

Merritt Island, FL 32954
(City/State and Zip Code)

For further information concerning this matter, please call:

Timothy Levensaler at (321) 258-7466
(Name of Person) (Area Code & Daytime Telephone Number)

MAILING ADDRESS:
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

STREET ADDRESS:
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Enclosed is a check for the following amount:

\$125.00 Filing Fee \$130.00 Filing Fee & Certificate of Status \$155.00 Filing Fee & Certified Copy \$160.00 Filing Fee, Certificate of Status & Certified Copy



FLORIDA DEPARTMENT OF STATE
Division of Corporations

RECEIVED

08 JUN -4 PM 12:31

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

May 23, 2008

TIMOTHY LEVENSALE
SOPHLEX GULF SHIPPING, LLC
P O BOX 542349
MERRITT ISLAND, FL 32954

SUBJECT: SOPHLEX GULF SHIPPING, LLC
Ref. Number: W08000025625

We have received your document for SOPHLEX GULF SHIPPING, LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please list the complete principal's office address.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6855.

Tammy Hampton
Regulatory Specialist II
Registration/Qualification Section

Letter Number: 208A00032802

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO
TRANSACTION BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN
LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

1. Sophlex Gulf Shipping, LLC
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")

n/a

(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written consent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liability Company," "L.L.C.," "LLC.")

2. Louisiana 3. 26-0500750
(Jurisdiction under the law of which foreign limited liability company is organized) (FEI number, if applicable)

4. 7/25/07 5. perpetual
(Date of Organization) (Duration: Year limited liability company will cease to exist or "perpetual")

6. 3/25/08
(Date first transacted business in Florida, if prior to registration.)
(See sections 608.501 & 608.502 F.S. to determine penalty liability)

7. ~~No principal office in FL~~
621 St. Charles Ave. New Orleans, LA
(Street Address of Principal Office) 70130

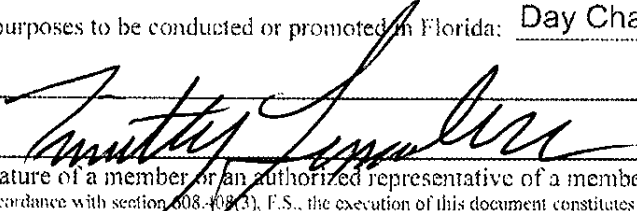
8. If limited liability company is a manager-managed company, check here

9. The name and usual business addresses of the managing members or managers are as follows:

Timothy Levensaler
PO Box 542349
Merritt Island, FL 32954

10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted.)

11. Nature of business or purposes to be conducted or promoted in Florida: Day Charter
for crew boat


Signature of a member or an authorized representative of a member.
(In accordance with section 608.408(3), F.S., the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)
Timothy Levensaler
Typed or printed name of signee

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The name of the Limited Liability Company is:

Sophlex Gulf Shipping, LLC

If name unavailable, the alternate name to be used in the state of Florida is:

n/a

2. The name and the Florida street address of the registered agent and office are:

Patricia K. Olney, P.A.

(Name)

677 Dave Nisbet Dr., Ste. 110

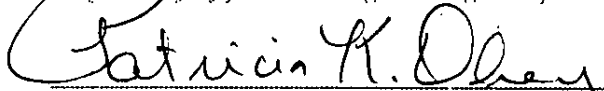
Florida Street Address (P. O. Box NOT ACCEPTABLE)

Port Canaveral, FL 32920

FL

(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 position as registered agent as provided for in Chapter 608, Florida Statutes.



(Signature)

\$ 100.00 Filing Fee for Application
\$ 25.00 Designation of Registered Agent
\$ 30.00 Certified Copy (optional)
\$ 5.00 Certificate of Status (optional)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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FILED

United States of America
State of Louisiana



As Secretary of State, Jay Dardenne, I do hereby Certify that

SOPHLEX GULF SHIPPING, LLC

A limited liability company domiciled in SCHRIEVER,
LOUISIANA,

Filed charter and qualified to do business in this State on
July 25, 2007,

I further certify that the records of this Office indicate
the company has paid all fees due the Secretary of State,
and so far as the Office of the Secretary of State is
concerned, is in good standing and is authorized to do
business in this State.

I further certify that this certificate is not intended to
reflect the financial condition of this company since this
information is not available from the records of this
Office.

In testimony whereof, I have hereunto set
My hand and caused the Seal of my Office
To be affixed at the City of Baton Rouge on,

May 8, 2008

Secretary of State
36504457K



Certificate ID: 20080508004544

To validate this certificate, visit the following web site,
go to **Commercial Division, Validate Certificate**, then
follow the instructions displayed.

www.sos.louisiana.gov