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To: Regulation Sention Division of Corporation Double Deported of Mate

> Dear Sir on Madam Our Applieste " certifich of Existent oul - chil Ethranant of \$29375 Laner the following: OF Dergnete of Regular Agent 3500

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2800 Island Boulevard, Suite 2903 • North Miami, Florida 33160 • U.S.A. Tel: 305-705-0710 • Fax: 305-705-0900 • E-mail: ron@seaviewsubs.com Website: http://www.seaviewsubs.com

FILED SECRETARY OF STATE DIVISION OF CORPORATIONS

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT 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. SEA VIEW (Name of foreign limited liability so contained in the name at press	company must end with the wo	ELLC rds "limited company" or their abbre	eviation "L.C." if not
2. Delaware (Jurisdiction under the law of which company is organized)	ich foreign limited liability 3.	(FEI number, if appl	·
4. 7/14/97 (Date of Organiza	5. tion)	(Duration: Year limited liability corexist or "perpetual")	mpany will cease to
	ted business in Florida. (See sec	tions 608.501, 608.502, and 817.155	5, F.S.)
		33160 incipal office)	
8. List name, title, and business			
	~ ~ ~	orida: (attach additional page if	
will manage the foreign limit	ted liability company in Flo		
will manage the foreign limit NAME & ADDRE RONALD 2800 F. Suit-290	ted liability company in Flores: Nilson Rocht lond Blud 3	orida: (attach additional page i	f necessary) TITLE:
will manage the foreign limit NAME & ADDRE RENALD 2800 F.	ted liability company in Flores: Nilson Rocht lond Blud 3	orida: (attach additional page i	TITLE: OIVISION OF 98 JAN 2
will manage the foreign limit NAME & ADDRE RONALD 2800 F. Suit-290	ted liability company in Flores: Nilson Rocht lond Blud 3	orida: (attach additional page i	TITLE: OIVISION OF FINANCE OF THE SECRETARY OF THE SECRE
will manage the foreign limit NAME & ADDRE RONALD 2800 F. Suit-290	ted liability company in Flores: Nilson Rocht lond Blud 3	orida: (attach additional page i	f necessary) TITLE:

^{9.} Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the Secretary of State or the proper official having custody of records in the state 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.)

AFFIDAVIT OF MEMBERSHIP AND CONTRIBUTIONS OF FOREIGN LIMITED LIABILITY COMPANY

The undersigned member or authorized representative of a member of	/iew_
Submersibler, LLC certifies:	
1) the above named limited liability company has at least two members;	
2) the total amount of cash contributed by the member(s) is	\$ 10,000
3) if any, the agreed value of property other than cash contributed by member(s) is (A description of the property is attached and made a part hereto.)	s_ N(A;
and 4) the total amount of cash and property contributed and anticipated to be contributed by member(s) is (This total includes amounts from 2 and 3 above.)	10,000.00 \$_ \d
(Imb tour morates amount from 2 and 3 above.)	
Royall Vilson	
Signature of a member or an authorized representative of a mem	ber.
(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	9X Pivigi
stated herein are true.)	98 JAN 21
	12
RONALD Nilson	<u>െ</u> ന
Typed or printed name of signee	OF STATION PM 12: 42
	2: 2
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Filing Fee: \$250.00 for Application and Affidavit

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:		
Sea View Submersibles, LLC		
2. The name and the Florida street address of the registered agent and office are:	5 0	ĮQ.
RONALD N: 150N (Name)	98 JAN 21	VISION OF C
7800 Island Blud. Suite 2903 Florida street address (P.O. Box NOT ACCEPTABLE)	PH 12: 42	RY OF STATE CORPORATIONS
North Miami FL 33160 City/State/Zip	. •	\$
Having been named as registered agent and to accept service of process for the above stated lin liability company at the place designated in this certificate, I hereby accept the appointment as agent and agree to act in this capacity. I further agree to comply with the provisions of all state relating to the proper and complete performance of my duties, and I am familiar with and acceptability of my position as registered agent.	regis utes	tered
(Signature)		

Filing Fee: \$ 35 for Designation of Registered Agent



State of Belaware

981016309

SECRETARY OF STATE DIVISION OF CORPORATIONS P.O. BOX 898 DOVER, DELAWARE 19903

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01-14-98

SEAVIEW SUBMERSIBLES, LLC. 2800 ISLAND BLVD., STE. 2903

NORTH MIAMI

33160

ATTN: RONALD NILSON

X

DESCRIPTION	AMOUNT
SEA VIEW SUBMERSIBLES, LLC 2772547 8300 Certificate in Re Short	
Certification Fee Expedite Same Day, 1-3 Re Short _e	20.00 40.00
FILING TOTAL	60.00
TOTAL PAYMENTS	60.00
SERVICE REQUEST BALANCE	.00

State of Delaware

Office of the Secretary of State PAGE 1

I, EDWARD J. FREEL, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "SEA VIEW SUBMERSIBLES, LLC" IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE FOURTEENTH DAY OF JANUARY, A.D. 1998.

Edward J. Freel, Secretary of State

AUTHENTICATION:

8865794

DATE:

01-14-98

2772547 8300

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