P95000024872 TRANSMITTAL LETTER

Department of State Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

SUBJECT: GCM Technical Marine Services, Inc.

500001441185 -03/28/95--01043--012 *****78.75

	Proposed corporate	name - must include suffix)	
Enclosed is an origins for : (iii) \$70.00 Filing Fee	x \$78.75 Filing Fee & Certificate	\$122.50 \$131.25 Filing Fee Filing Fee, & Certified Copy & Certificate Additional Copy Required	
FROM:	GCM Technical Marine Services, Inc. Name (printed or typed) 1750 East Duval Street		SECRETARY DIVISION OF CO 95 HAR 27
	Jackso	nville, FL 32202	OF STATE OF
	904-79 Daytime	1-9366 Telephone number	

NOTE: Please provide the original and one copy of the articles.

ARTICLES OF INCORPORATION 95 HAR 27 AH 4:08

The undersigned incorporator(s), for the purpose of forming a corporation under the Florida Business Corporation Act, hereby adopt(s) the following Articles of Incorporation.

ARTICLE I NAME

The name of the corporation shall be:

GCM Technical Marine Services, Inc.

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this corporation shall be:

1750 East Duval Street Jacksonville, FL 32202

ARTICLE III SHARES

The number of shares of stock that this corporation is authorized to have outstanding at any one time is: $100\,$

ARTICLE IV INITIAL REGISTERED AGENT AND STREET ADDRESS

The name and address of the initial registered agent is:

Chad S Roberts 1750 East Duval Street Jacksonville, FL 32202

ARTICLE V INCORPORATOR(S)

The name(s) and street address(es) of the incorporator(s) to these Articles of Incorporation is(are):

Chad S Roberts 1750 East Duval Street Jacksonville, FL 32202

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Articles of Incorporation Filing Fee - \$35

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501 or 617.0501, FLORIDA STATUTES, THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

The name of the corporation is:_	GCM Technical	Marine	Services, Inc.
-			
2. The name and address of the reg	istered agent and o	office is:	
	(Name)	<u> </u>	
Chad S Roberts 1750 East Duva			
	lail Drop Box NOT	(cceptable)	
Jacksonville,	_F1 32202		
	(City/State/Zip)		

Having been named as registered agent and to accept service of process for the above stated corporation 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.

(Signature) 3-17-95 (Dam)