

L1500007F055

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H15000108804 3)))



H150001088043ABC..

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To: Division of Corporations
Fax Number : (850) 617-6383

From: Account Name : FILINGS, INC.
Account Number : 072720000101
Phone : (850) 385-6735
Fax Number : (954) 641-4192

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: _____

15 MAY - 4 AM 7:59
FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

15 MAY - 6 AM 10:00

BUREAU OF CORPORATE & FINANCIAL INFORMATION SERVICES

FLORIDA LIMITED LIABILITY CO.
2909 S. OCEAN BLVD., LLC

Certificate of Status	0
Certified Copy	1
Page Count	02
Estimated Charge	\$155.00

H15000108804

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

2909 S. Ocean Blvd., LLC

(Must end with the words "Limited Liability Company," "L.L.C.," or "LLC.")

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:

Mailing Address:

6070 N. Federal Hwy.
Boca Raton, FL 33487

6070 N. Federal Hwy.
Boca Raton, FL 33487

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

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

Steven Serle, P.A.

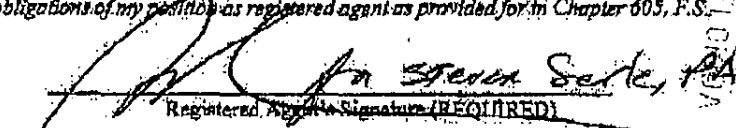
Name

6070 N. Federal Hwy.

Florida street address (P.O. Box NOT acceptable)

Boca Raton Florida 33487
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 am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S.


Registered Agent's Signature (REQUIRED)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA
15 MAY - 4 AM 7:50
FILED

(CONTINUED)

H15000108804

