

Document Number Only

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CT Corporation System
660 East Jefferson Street
Tallahassee, FL 32301
850-222-1092

DATE: 11/20

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****125.00 ****125.00

Corporation(s) Name

South Ocean Boulevard, L.L.C.

☐ Profit
☐ Nonprofit

☐ Amendment

☐ Merger

☒ Foreign
☒ LLC

☐ Dissolution
☐ Withdrawal

☐ Mark

☐ Limited Partnership
☐ Reinstatement
☐ UCC ☐ 1 or ☐ 3

☐ UBR
☐ Fictitious Name

☐ Other
☐ Ch. RA

***Special Instructions**

☐ Certified Copy
☐ Photocopies
☐ Parts/amends/mergers ☐ Other-See Above

☐ CUS

☒ Walk in

☒ Pick-up

☐ Will Wait

Please Return Filed Stamped
Copies To:

Carol Clark

Thank You!

11-20-00

RECEIVED

00 NOV 20 AM 11:16

DIVISION OF CORPORATIONS

00 NOV 20 PM 12:14
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

APPROVED
AND
FILED

**ARTICLES OF ORGANIZATION
OF
SOUTH OCEAN BOULEVARD, L. L.C.**

The undersigned, for the purpose of forming a limited liability company under the Florida Limited Liability Company Act, Chapter 608, Florida Statutes, hereby makes, acknowledges, and files the following Articles of Organization.

ARTICLE I - Name

The name of the limited liability company (the "Limited Liability Company") is:

South Ocean Boulevard, L.L.C.

ARTICLE II - Address

The mailing address and, if different, the street address of the principal office of the Limited Liability Company is/are:

1100 Linton Boulevard
Suite C-4
Delray Beach, Florida 33444

ARTICLE III - Purposes and Powers

The purpose for which the Limited Liability Company is organized is to purchase, take, receive, lease, or otherwise acquire, own, hold, improve, or use, manage, or otherwise deal in or with, real or personal property, or an interest in real or personal property, wherever situated and to transact any lawful business for which a limited liability company may be organized under the laws of the State of Florida. The Limited Liability Company shall have all the powers granted to a limited liability company under the laws of the State of Florida.

ARTICLE IV - Management

The Limited Liability Company shall be a manager-managed company and shall be managed by one or more managers in accordance with regulations adopted by the members of the Limited Liability Company for the management of the business and affairs of the Limited Liability Company. These regulations may contain any provisions for the regulation and management of the business and affairs of the Limited Liability Company not inconsistent with applicable law or these Articles of Organization.

APPROVED
AND
FILED
00 NOV 20 PM 12:1
SECRETARY OF STATE
TALLAHASSEE, FLOR.

ARTICLE V - Registered Agent

The name and street address of the initial registered agent of the Limited Liability Company are:

C T CORPORATION SYSTEM
1200 South Pine Island Road
Plantation, Florida 33324

ARTICLE VI - Registered Office

The street address of the initial registered office of the Limited Liability Company is:

c/o C T CORPORATION SYSTEM
1200 South Pine Island Road
Plantation, Florida 33324

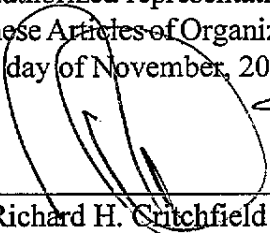
ARTICLE VII - Admission of New Members

The admission of new members to the Limited Liability Company and the transfer of the interest of members in and to the Limited Liability Company shall be in accordance with regulations adopted by the members of the Limited Liability Company for the management of the business and affairs of the Limited Liability Company.

ARTICLE VIII - Termination of Existence

The Limited Liability Company shall be dissolved upon the happening of any event which causes the dissolution of the Limited Liability Company pursuant to applicable law or pursuant to the regulations adopted by the members of the Limited Liability Company for the management of the business and affairs of the Limited Liability Company, unless the business of the Limited Liability Company is continued by the consent of all members, provided that there are at least two (2) members and such continuance is in accordance with applicable law.

IN WITNESS WHEREOF, the undersigned authorized representative of a member of the Limited Liability Company has made and subscribed these Articles of Organization at Delray Beach, Florida, for the foregoing uses and purposes this 14th day of November, 2000.


Richard H. Critchfield

NOV 20 PM 12:14
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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AND
FILED

STATE OF FLORIDA

COUNTY OF PALM BEACH

Before me this 14th day of November, 2000, personally appeared Richard H. Critchfield, the authorized representative of a member of the above-named limited liability company, who is personally known to me and who subscribed the foregoing Articles of Organization, and he acknowledged before me that he executed the foregoing Articles of Organization for the purposes therein expressed.

Kathryn S. Douglas

Notary Public

Name: _____

Commission Number: _____

My Commission Expires: _____



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AND
FILED

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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:

South Ocean Boulevard, L.L.C.

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

CT CORPORATION SYSTEM

(Name)

1200 SOUTH PINE ISLAND ROAD

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

PLANTATION

FL

33324

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, F.S..

CONNIE BRYAN

SPECIAL ASSISTANT SECRETARY

Connie Bryan
(Signature)

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

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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AND
FILED