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Florida Department of State

Division of Corporations

Public Access System

Katherine Harris, Secretary of State

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To: Division of Corporations  
Fax Number : (850) 205-0383

From: Account Name : EMPIRE CORPORATE KIT COMPANY  
Account Number : 072450003255  
Phone : (305) 634-3694  
Fax Number : (305) 633-9696

AL

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

01 AUG 29 PM 3:50

RECEIVED

LIMITED LIABILITY COMPANY

OCEANSIDE INVESTORS, LLC

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

②  
**ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY**

**ARTICLE I - Name:**

The name of the Limited Liability Company is:

**OCEANSIDE INVESTORS, LLC**

**ARTICLE II - Address:**

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

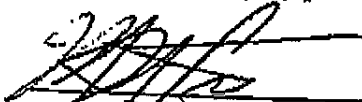
5370 NW 35<sup>th</sup> Terrace  
 Building B, Suite 111  
 Fort Lauderdale, FL 33309

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

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

Michael R. Presley  
 5370 NW 35<sup>th</sup> Terrace  
 Building B, Suite 111  
 Fort Lauderdale, FL 33309


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.



Registered Agent's Signature

**ARTICLE IV - Management**

  X   The Limited Liability Company is to be managed by one manager or more managers and is, therefore, a manager - managed company.



Signature of a member or an authorized representative of a member.

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

Michael R. Presley

Typed or printed name of signee

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 SECRETARY OF STATE  
 TALLAHASSEE, FLORIDA  
 01 AUG 29