

LOS000083233

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

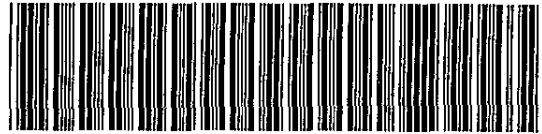
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

LOS-83233
OK

August 9, 2005

Registration Section
Division of Corporations
Post Office Box 6327
Tallahassee, FL 32314

Please accept this application for incorporating: **Lauderdale Ocean Fountains, LLC**

Please contact me with any questions, at:

Ayelet Mullen
2110 North Ocean Boulevard, Suite 1604
Fort Lauderdale, FL 33305
Tel: 954-568-5272

Sincerely,



Ayelet Mullen

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TALLAHASSEE, FLORIDA

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TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Lauderdale Ocean Fountains, LLC
(Name of Limited Liability Company)

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Ayelet Mullen
(Name of Person)

Lauderdale Ocean Fountains LLC
(Firm/Company)

2110 N. Ocean Blvd, Suite 1604
(Address)

Fort Lauderdale, FL 33305
(City/State and Zip Code)

For further information concerning this matter, please call:

Ayelet Mullen at (954) 235-2300
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- ☐ \$125.00 Filing Fee ☐ \$130.00 Filing Fee & Certificate of Status ☐ \$155.00 Filing Fee & Certified Copy (additional copy is enclosed) ☒ \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

STREET ADDRESS:
Registration Section
Division of Corporations
409 E. Gaines Street
Tallahassee, Florida 32399

MAILING ADDRESS:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

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TALLAHASSEE, FLORIDA

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Lauderdale Ocean Fountains, LLC

ARTICLE II - Address:

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

Principal Office Address:

2115 N Ocean Blvd #1604
Fort Lauderdale FL 33305

Mailing Address:

Same

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

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

Ayelet Mullen
Name

2110 N. Ocean Blvd #1604
Florida street address (P.O. Box **NOT** acceptable)
Ft. Lauderdale FL 33305
City, State, and 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.

Ayelet Mullen
Registered Agent's Signature

(CONTINUED)

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TALLAHASSEE, FLORIDA

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ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

Title:

"MGR" = Manager

"MGRM" = Managing Member

Name and Address:

MGRM

Ayelet Mullen
2110 N. Ocean Blvd #1604
Ft. Lauderdale FL 33305

MGRM

Edward Mullen
2110 N. Ocean Blvd #1604
Ft. Lauderdale FL 33305

(Use attachment if necessary)

NOTE: An additional article must be added if an effective date is requested.

REQUIRED SIGNATURE:

Ayelet Mullen, Managing Member
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.)

Ayelet Mullen, Managing Member
Typed or printed name of signee

Filing Fees:

- \$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
- \$ 30.00 Certified Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)