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SECRETARY OF STATE



COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: Oceanside Finance 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:		
Michelle Kohler		
(Name of Person)		
Oceanside Finance LLC c/o Oceanside Reso	orts, Inc.	
(Firm/Company)		
605 Lincoln Road, #320		
(Address)		
Miami Beach, Florida 33139		
(City/State and Zip Code)		
For further information concerning this matter, please call:		
Michelle Kohlerat (305) 777-737	78	
Michelle Kohler at (305) 777-737 (Name of Person) (Area Code & Daytime Te.	lephone Number)	
Enclosed is a check for the following amount:		
\$125.00 Filing Fee \$\sum \$130.00 Filing Fee & Certificate of Status Certified Copy (additional copy is enclosed)	\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)	
Mailing AddressStreet/Courier AddressRegistration SectionRegistration SectionDivision of CorporationsDivision of CorporationP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive CenterTallahassee, FL 32301	ns AS C	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the Limited Liability Company is:		
Oceanside Finance LLC		
Must end with the words "Limited Liability Company, "Limited	1 Company" or their abbreviation "LLC,"	or "L.C.,")
ARTICLE II - Address:	•	
The mailing address and street address of the pri	ncipal office of the Limited Lial	oility Company is:
-	•	
Principal Office Address:	Mailing Address:	
605 Lincoln Road, #320	605 Lincoln Road, #320	
Miami Beach, FL 33139	Miami Beach, FL 33139	
	·	_ _
ARTICLE III - Registered Agent, Registered The Limited Liability Company cannot serve as its own Registe business entity with an active Florida registration.)	ered Agent. You must designate an individ	
Γhe name and the Florida street address of the re	egistered agent are:	
Claire Callen		
Name		
605 Lincoln Road, #320		
Florida street add	ress (P.O. Box <u>NOT</u> acceptable)	
Miami Beach	FL 33139	
City, State, a		
Having been named as registered agent and to a liability company at the place designated in the registered agent and agree to act in this capacity statutes relating to the proper and complete per accept the obligations of my position as registered Agent's Signature.	nis certificate, I hereby accept the I further agree to comply with to formance of my duties, and I am tered agent as provided for in Ch are (REQUIRED)	appointment as the provisions of all familiar with and
(CONTINU Page 1 of 2) (3.17)	: 55 ATE RIDA

ARTICLE IV- Manager(s) or Managing Member(s): The name and address of each Manager or Managing Member is as follows: Name and Address: Title: "MGR" = Manager "MGRM" = Managing Member MGR -Claire Callen 605 Lincoln Road, #320 Miami Beach, FL 33139 (Use attachment if necessary) . (OPTIONAL) ARTICLE V: Effective date, if other than the date of filing: _ (If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.) **REQUIRED SIGNATURE:** Signature of a member or an authorized)representative of a member. (In accordance with section 608.408(3), Florida Statutes, the execution

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)

Claire Callen

that the facts stated herein are true.)

of this document constitutes an affirmation under the penalties of perjury

Typed or printed name of signee