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(Re	equestor's Name)	
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PICK-UP	☐ WAIT	MAIL
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Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

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SECRETARY OF STATE STATE OF CORPONATIONS

COVER LETTER

	Registration S Division of Co				
SURIFC	т. Осеаг	nFÉ Enterprises L.	L.C.		
SCIMEC	••		ed Liability Compa	nny)	
The enclo	sed Articles o	of Organization and fee(s) are	submitted for filing	3.	
Please ret	urn all corresp	oondence concerning this mat	ter to the following	:	
Α	ndrew S	. Ellis			
			(Name of Person)		
C)ceanFÉ	Enterprises L.L.C	•		
	•		(Firm/Company)		
1-	473 Crai	ne Creek Blvd.			
			(Address)		
V	iera, Fl 3	32940			
		(Cir	y/State and Zip Code)	
For furthe	r information	concerning this matter, pleas	e call:		
Andre	w Ellis		_{at (} 561	4274120	1
	(Name	of Person)	(Area Code	& Daytime Tele	phone Number)
Enclosed	is a check for	or the following amount:			
\$125.00	Filing Fee	\$130.00 Filing Fee & Certificate of Status	\$155.00 Filing Certified Cop (additional copy	ру	\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
		Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Registration Division of Clifton Board Exe	ourier Address on Section of Corporations uilding cutive Center C	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:	
The name of the Limited Liability Company is:	
OceanFÉ Enterprises L.L.C.	
(Must end with the words "Limited Liabili	ty Company, "L.L.C.," or "LLC.")
ARTICLE II - Address:	incipal office of the Limited Liability Company is:
The manning address and street address of the pri	incipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
1473 Crane Creek Blvd.	1473 Crane Creek Bivd.
Viera, FI 32940	Viera, FI 32940
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Register business entity with an active Florida registration.) The name and the Florida street address of the registered address of the registered address.	ered Agent. You must designate an individual or another
Andrew Ellis	0.0V
Name	SECRETAR JSION OF C 7 DEC 28
1473 Crane Creek Bl	
Florida street add	ress (P.O. Box NOT acceptable)
Viera, Fl 32940	FI. ± 310.0
City, State, a	nd Zip
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 service of process for the above stated limited his certificate, I hereby accept the appointment as a. I further agree to comply with the provisions of all rformance of my duties, and I am familiar with and tered agent as provided for in Chapter 608, F.S

(CONTINUED)
Page 1 of 2

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

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

Manager	Andrew Ellis	
	1473 Crane Creek Blvd.	· · · · · · · · · · · · · · · · · · ·
	Viera, FL 32940	
		
		
		
(Use attachment if nec	y)	
LE V: Effective date, i	er than the date of filing:	. (OPTIONA
days after the date of	te must be specific and cannot be more	than live dusiness day

Signature of a nember 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.)

Andrew Ellis

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)

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