

L09000033999

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

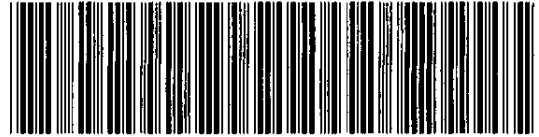
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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04/07/09--01010--024 \*\*125.00

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FILED  
09 APR - 7 AM 11:21  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

J. BRYAN  
APR - 8 2009  
EXAMINER

*Bosso, Bosso & Pardo, P.A.*

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April 1, 2009

**Via FEDERAL EXPRESS**

Florida Department of State  
Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

FILED  
09 APR - 7 AM 11:21  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Re: Filing of Ocean Horizon Properties of Florida, LLC

Dear Sir/Madam,

I am enclosing my firm's check in the amount of \$125.00 made payable to Florida Department of State for filing the Articles of Organization and Designation of Registered Agent for Ocean Horizon Properties of Florida, LLC.

I am also enclosing a \$5.00 check to obtain a certification of status. I am enclosing two original signed Articles of Organization for filing.

Sincerely Yours,



**Angelo Pardo, Esq.**  
Bosso, Bosso and Pardo, P.A.

AP: LME

Enclosures: Firm's check \$125.00  
Firm's check \$ 5.00  
2 Articles of Organization

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

**ARTICLE I - Name:**

The name of the Limited Liability Company is:

OCEAN HORIZON PROPERTIES OF FLORIDA, LLC

(Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")

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TALLAHASSEE, FLORIDA

**ARTICLE II - Address:**

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

**Principal Office Address:**

**Mailing Address:**

457 Ocean Ridge Way  
Juno Beach, FL 33408

457 Ocean Ridge Way  
Juno Beach, FL 33408

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

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

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

Deborah M. Kassir

Name

457 Ocean Ridge Way

Florida street address (P.O. Box **NOT** acceptable)

Juno Beach, FL 33408

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..*



Registered Agent's Signature (REQUIRED)

(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:

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TALLAHASSEE, FLORIDA

**Title:**

"MGR" = Manager

"MGRM" = Managing Member

**Name and Address:**

MGR \_\_\_\_\_

Deborah M. Kassir  
457 Ocean Ridge Way  
Juno Beach, FL 33408

MGR \_\_\_\_\_

Nabil Kassir  
457 Ocean Ridge Way  
Juno Beach, FL 33408

\_\_\_\_\_

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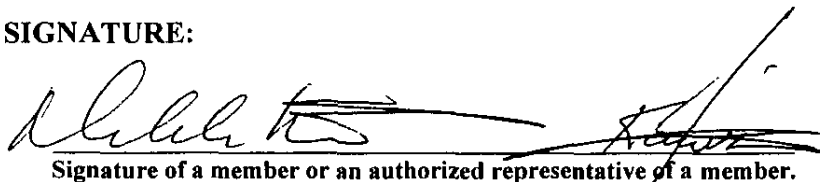
\_\_\_\_\_

\_\_\_\_\_

(Use attachment if necessary)

**ARTICLE V:** Effective date, if other than the date of filing: \_\_\_\_\_ (OPTIONAL)  
(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 of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

**Deborah M. Kassir**  
\_\_\_\_\_  
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)