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EXAMINER



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SACURATIONS CONTRACTORS OF CONTRACTORS

EFFECTIVE DATE 11/14/2011

11 NOV 15 PH 2: 27



ION SERVICE COMPANY
ACCOUNT NO. : 12000000195
REFERENCE: 979999 4609278
AUTHORIZATION :
COST LIMIT : \$ 155.00
ORDER DATE: November 14, 2011
ORDER TIME : 5:29 PM EFFECTIVE DATE 11/17/20
ORDER NO. : 979990-005
CUSTOMER NO: 4609278
*
DOMESTIC FILING
NAME: GBX OCEANFRONT ESTATES LLC
EFFECTIVE DATE:
ARTICLES OF INCORPORATION CERTIFICATE OF LIMITED PARTNERSHIP ARTICLES OF ORGANIZATION
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:
XX CERTIFIED COPY PLAIN STAMPED COPY CERTIFICATE OF GOOD STANDING

EXAMINER'S INITIALS:

CONTACT PERSON: Becky Peirce - EXT. 2919

COVER LETTER

COVER	LETTER EFFECTIVE DATE 11/14/2011
TO: Registration Section Division of Corporations	To the state of th
SUBJECT: GBX Oceanfront Estates LLC	To Confidence
	Liability Company
The enclosed Articles of Organization and fee(s) are sub	•
Andrew M. Klinger	
	me of Person
Grant Herrmann Schwartz & Klinger LL	
675 Third Avenue, 26th Floor	rm/Company
	Address
New York, NY 10017	•
City/St	ate and Zip Code
aklinger@ghsklaw.com	
E-mail address: (to be used for f	uture annual report notification)
For further information concerning this matter, please ca	н:
Andrew M. Klinger	(212) 682-1800
Name of Person	Area Code & Daytime Telephone Number
Enclosed is a check for the following amount:	j
\$125.00 Filing Fee \$\int \$130.00 Filing Fee & \int \text{Certificate of Status}	\$155.00 Filing Fee & \$160.00 Filing Fee, Certified Copy Certificate of Status & Certified Copy (additional copy is enclosed)

Mailing Address

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street/Courier Address Registration Section

Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

EFFECTIVE DATE 14 204

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY		
ARTICLE I - Name: The name of the Limited Liability Comp	pany is:	
GBX Oceanfront Estates LLC	To Care	
(Must end with the words "Limi	ited Liability Company, "L.L.C.," or "LL.C.")	
ARTICLE II - Address: The mailing address and street address of Principal Office Address:	of the principal office of the Limited Liability Company is:	
675 3rd Avenue, 26th Floor New York, NY 10017	c/o Andrew M. Klinger 675 3rd Avenue, 26th Floor New York, NY 10017	
	gistered Office, & Registered Agent's Signature: wn Registered Agent. You must designate an individual or another	

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

Corporation Ser	vice Company
	Name
1201 Hays Stree	et .
F	orida street address (P.O. Box NOT acceptable
Tallahassee	FL 32301
	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..

Corporation Service Company

By: Becky Peirce Assistant Vice President

(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:

Operating MGR	Marcos Lederman c/o GHSK LLP 675 3td Ave., 26th Floor, New York, NY 1001
(Use attachment if necessary)	

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. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)

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)