

**L12000037255**

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the tax audit number (shown below) on the top and bottom of all pages of the document.

((H12000068860 3)))



H120000688603ABC+

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:  
Division of Corporations  
Fax Number : (850) 617-6383

From:  
Account Name : NASON, YEAGER, GERSON, WHITE & LIOCE, P.A.  
Account Number : 073222003555  
Phone : (561) 686-3307  
Fax Number : (561) 471-0894

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: bmam@nasonyeager.com

12 MAR 15 AM 8:39  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED

**FLORIDA LIMITED LIABILITY CO.  
Seafari Emory Point, LLC**

Certificate of Status	1
Certified Copy	0
Page Count	03
Estimated Charge	\$130.00

RECEIVED  
12 MAR 15 PM 3:17  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**D. BRUCE**  
MAR 16 2012  
**EXAMINER**

Electronic Filing Menu Corporate Filing Menu Help

**ARTICLES OF ORGANIZATION**  
**OF**  
**SEAFARI EMORY POINT, LLC**

I, the undersigned authorized representative of the Members, hereby make, acknowledge and file these Articles of Organization for the purpose of forming a limited liability company under the laws of the State of Florida.

**ARTICLE I**  
**NAME**

The name of this Limited Liability Company is:

SEAFARI EMORY POINT, LLC

**ARTICLE II**  
**ADDRESS**

The street address and mailing address of the principal office is:

3920 RCA Blvd., Suite 201  
Palm Beach Gardens, FL 33410

**ARTICLE III**  
**DURATION**

The period of duration for the Limited Liability Company shall be perpetual.

**ARTICLE IV**  
**MANAGEMENT**

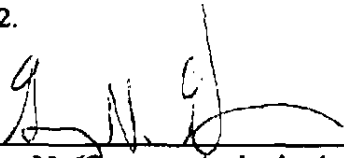
The powers of the Limited Liability Company shall be exercised by or under the authority of, and the business and affairs of the Limited Liability Company shall be managed under the direction of its Manager and is, therefore, a manager-managed company.

FILED  
12 MAR 15 AM 8:39  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLE V**  
**ADMISSION OF ADDITIONAL MEMBERS**

The Members shall have the right to admit additional members.

IN WITNESS WHEREOF, the undersigned authorized representative of the Members has made and subscribed these Articles of Organization at West Palm Beach, Florida, for the uses and purposes aforesaid, this 15 day of March, 2012.

  
\_\_\_\_\_  
Gary N. Gerson, Authorized Representative of the  
Members

**FILED**  
**12 MAR 15 AM 8:39**  
**SECRETARY OF STATE**  
**TALLAHASSEE, FLORIDA**

**CERTIFICATE OF DESIGNATION OF  
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The name of the Limited Liability Company is:

SEAFARI EMORY POINT, LLC

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

Gary N. Gerson  
1645 Palm Beach Lakes Blvd.  
Suite 1200  
West Palm Beach, Florida 33401

*Having been named as registered agent to accept service of process for the above-stated limited liability company, at the location designated herein, I hereby consent to and accept the appointment to act in this capacity, acknowledge that I am familiar with and accept the obligations of a registered agent and agree to comply with the laws of Florida applicable thereto.*

  
\_\_\_\_\_  
Gary N. Gerson, Registered Agent

FILED  
12 MAR 15 AM 8:39  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA