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Certified Copies	_ Certificates	of Status
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COVER LETTER

Registration Section Division of Corporations

TO:

SUBJECT: WATSON BEACHWAI	LK LLC
	ted Liability Company
The enclosed Articles of Organization and fee(s) are	submitted for filing.
Please return all correspondence concerning this mat	ter to the following:
MICHELLE CHAN	
	Name of Person
	Firm/Company
2104 NW 22ND AVE #114	
	Address
STUART FL 34994	
michellechan@bellsouth.net	ty/State and Zip Code
	for future annual report notification)
For further information concerning this matter, pleas	e call:
MICHELLE CHAN	_at (772) 285 3111
Name of Person	Area Code & Daytime Telephone Number
Enclosed is a check for the following amount:	
\$125.00 Filing Fee \$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 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

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

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The name of the Limited Liability Company is:

WATSON BEACHWALK LLC

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

ARTICLE II - Address:

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

Principal Office Address:	Mailing Address:		
2104 NW 22ND AVE #114	2104 NW 22ND AVE #114		
STUART FL 34994	STUART FL 34994		
(The Limited Liability Company cannot serve as its business entity with an active Florida registration.)	gistered Office, & Registered Agent's Sown Registered Agent. You must designate an individu	ial or another	
The name and the Florida street address	of the registered agent are:	IZ MAR	
MICHELLE CH	AN	\$5.84 61.8	7
	Name	(E) (C)	(F)
2104 NW 22	ND AVE #114		
Florida	street address (P.O. Box NOT acceptable)	A77	
STUART	_{FL} 34994		
	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)

W (CD") (Name and Address:
"MGR" = Manager	
"MGRM" = Managing Member	
MGR	MICHELLE CHAN
**************************************	2104 NW 22ND AVE #114
	STUART FL 34994
CLE V: Effective date, if other than the ffective date is listed, the date must be days after the date of filing.)	e date of filing: (OPTIO be specific and cannot be more than five business
g.,	
REQUIRED SIGNATURE:	
	7.11. (64.
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Signature of a member	er or an authorized representative of a member
(In accordance with section 608 constitutes an affirmation unde I am aware that any false information of the control of the co	8.408(3), Florida Statutes, the execution of this document of the penalties of perjury that the facts stated herein are true, mation submitted in a document to the Department of State
(In accordance with section 608 constitutes an affirmation unde I am aware that any false infor constitutes a third degree felong	8.408(3), Florida Statutes, the execution of this document of the penalties of perjury that the facts stated herein are true, mation submitted in a document to the Department of State y as provided for in s.817,155, F.S.)
(In accordance with section 608 constitutes an affirmation unde I am aware that any false information constitutes a third degree felon MICHELLE CI	8.408(3), Florida Statutes, the execution of this document of the penalties of perjury that the facts stated herein are true, mation submitted in a document to the Department of State y as provided for in s.817,155, F.S.)
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