

L13000022172

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

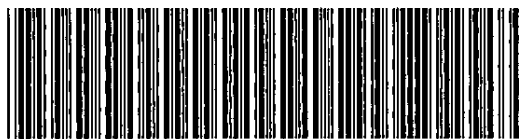
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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EFFECTIVE DATE
3-1-2013

02/11/13--01020--029 **160.00

FILED

13 FEB 11 PM 2:35

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

K. SALY
EXAMINER

FEB 12 2013

(850) 245-6051.

COVER LETTER

TO: **Registration Section**
Division of Corporations

SUBJECT: **Ocean Edge Media LLC**
Name of Limited Liability Company

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Michael Moore

Name of Person

Ocean Edge Media LLC

Firm/Company

218-A E. Eau Gallie Blvd. #130

Address

Indian Harbour Beach FL 32937

City/State and Zip Code

info@oceanedgemedias.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Michael Moore

Name of Person

at **321 759-2023**

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|--|---|---|--|
| <input type="checkbox"/> \$125.00 Filing Fee | <input type="checkbox"/> \$130.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$155.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input checked="" type="checkbox"/> \$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

EFFECTIVE DATE
3-1-2013

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

FILED
13 FEB 11 PM 2:35
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE I

The name of the Limited Liability Company is: **Ocean Edge Media LLC**

ARTICLE II

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

Principal Office Address:

**218-A E. Eau Gallie Blvd. #130
Indian Harbour Beach, FL 32937**

Mailing Address:

**218-A E. Eau Gallie Blvd. #130
Indian Harbour Beach, FL 32937**

ARTICLE III

The purpose for which this Limited Liability Company is organized is
ANY AND ALL LAWFUL BUSINESS

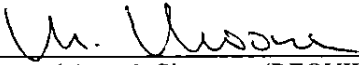
ARTICLE IV

Registered Agent, Registered Office, & Registered Agent's Signature:

Michael Moore

**218-A E. Eau Gallie Blvd. #130
Indian Harbour Beach, FL 32937**

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)

ARTICLE V

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

Title:

Name and Address:

MGR

Michael Moore

**218-A E. Eau Gallie Blvd. #130
Indian Harbour Beach, FL 32937**

ARTICLE V: Effective date, if other than the date of filing:

March 1, 2013

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.)

Michael Moore

Typed or printed name of signee