Division of Corporations Electronic Filing Cover Sheet

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

(((H13000238209 3)))



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

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : FILINGS, INC. Account Number : 072720000101

Phone

: (850)385-6735

Fax Number

: (954)641-4192

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

Emeil Address:

FLORIDA LIMITED LIABILITY CO. SOUTH ORCHID ISLAND, LLC

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$125.00

K. SALY EXAMINER

Electronic Filing Menu

Corporate Filing Menu

Help

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

13 OC - PILOD - NA 9:50

ARTICLE I - NAME

The name of the Limited Liability Company is South Orchid Island, LLC

ARTICLE II - ADDRESS

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

South Orchid Island, LLC 2145 14th Avenue, Suite 8 Vero Beach, FL 32960

ARTICLE III - DURATION

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

ARTICLE IV - MANAGEMENT

The Limited Liability Company is to be managed by the following members:

Joseph Caragol - MGRM 2145 14th Avenue, Suite 8 Vero Beach, FL 32960

Joseph Caragol

Aziz Debbagh - MGRM 2145 14th Avenue, Suite 8 Vero Beach, FL 32960

Aziz Debbagh

ARTICLE V - ADMISSION OF ADDITIONAL MEMBERS

The right, if given, of the members to admit additional members and the terms and conditions of the admissions shall be: Members may admit additional members upon majority agreement of current members.

ARTICLE VI-MEMBERS RIGHT TO CONTINUE BUSINESS

The death, retirement, resignation, expulsion, bankruptcy or dissolution of any member, or the occurrence of any event which terminates the continued membership of a member of this limited liability company, shall terminate this company, unless the remaining members shall unanimously agree to continue the business of the company, in which event, this company shall not so terminate.

IN WITNESS WHEREOF, the undersigned representative of a Member has executed these Articles of Organization on this 23 mday of October, 2013

Authorized Representative of a Member

Printed Name of Authorized Representative: Steven Serie, P.A.

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT AND 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 South Orchid Island, LLC
- The name and address of the registered agent and office is:

Steven Serie, PA 6070 N Federal Highway Boca Raton, FI 33487

ACKNOWLEDGEMENT

Having been named 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 statues 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.

Serie, PA Registered Agent

Dated: October 2013

H15000238209