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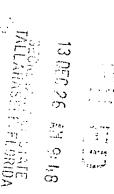
(Requestor's Name)					
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PICK-UP WAIT MAIL					
(Business Entity Name)					
(Cashidas Zhin, Marie)					
(Document Number)					
Certified Copies Certificates of Status					
Special Instructions to Filing Officer:					





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## **COVER LETTER**

	O: Registration Section Division of Corporations				
SUBJEC	CT:	OFG	PRINCETON CENTER	II, LLC	
				ted Liability Company	
The encl	osed A	rticles (	of Organization and fee(s) are	submitted for filing.	
Please re	turn all	corres	pondence concerning this mat	ter to the following:	
_		GRAN	T D. RELIC		
				Name of Person	
_		GRAN	T D. RELIC CO.,	LPA	
				Firm/Company	
		4178	3 Center Road		
_				Address	
		Brui	nswick, OH 44212	2	
			Cìt	ry/State and Zip Code	
		OFG	OFFICE@AOL.COM	for future annual report notification)	
For further	er infor	mation	concerning this matter, please		
GRANT	D.	REL	IC	at ( 330 ) 225-502	5
		Name	of Person	Area Code & Daytime Telep	hone Number
Enclosed	i is a c	heck f	or the following amount:		
\$125.00	) Filinį	g F <b>ee</b>	■\$130.00 Filing Fee & Certificate of Status	□\$155.00 Filing Fee & □ 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 Ci Tallahassee, FL 32301	rcle

### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the Limited Liability Company is:	
OFG PRINCETON CENTER II, LLC (Must end with the words "Limited Liabi	lity Company, "L.L.C.," or "LLC.")
. (as, old sam me volgs Emmed Blass	, osinpany.
ARTICLE II - Address:	the common of the transfer of the common of
the mailing address and street address of the pr	rincipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
271 S. Wimbrow Dr.	271 S. Wimbrow Dr.
Sebastian, FL 32958	Sebastian, FL 32958
and the second s	
ADTICLE III - Registered Agent Registered	Office & Registered Agent's Signature
ARTICLE III - Registered Agent, Registered The Limited Liability Company cannot serve as its own Regist business entity with an active Florida registration.)  The name and the Florida street address of the report PAUL P. OFFILL	registered agent are:
The Limited Liability Company cannot serve as its own Regist business entity with an active Florida registration.)	registered agent are:
The Limited Liability Company cannot serve as its own Regist business entity with an active Florida registration.)  The name and the Florida street address of the r  PAUL P. OFFILL  Name	registered agent are:
The Limited Liability Company cannot serve as its own Regist business entity with an active Florida registration.)  The name and the Florida street address of the r  PAUL P. OFFILL  Name  271 S. Wimbrow D:	registered agent are:
The Limited Liability Company cannot serve as its own Regist business entity with an active Florida registration.)  The name and the Florida street address of the r  PAUL P. OFFILL  Name  271 S. Wimbrow D:  Florida street add	registered agent are:
The Limited Liability Company cannot serve as its own Regist business entity with an active Florida registration.)  The name and the Florida street address of the r  PAUL P. OFFILL  Name  271 S. Wimbrow D:	registered agent are:

(CONTINUED)

Registered Agent's Signature (REQUIRED)
PAUL P. OFFILL

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:

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:
PAUL P. OFFILL MGRM	271 S. Wimbrow Dr. Sebastian, FL 32958
STEVEN P. OFFILL MGRM	3868 Huffman Road Medina, OH 44256
PAUL R. OFFILL MGRM	3137 McCracken Trail Brunswick, OH 44212
(Use attachment if necessary)  ARTICLE V: Effective date, if other than the d	ate of filing: 1-1-14 (OPTIONAL)
	be specific and cannot be more than five business days
REQUIRED SIGNATURE:	3 DEC 26
	or an authorized representative of a member:
constitutes an affirmation under the	e penalties of periury that the facts stated herein are true.

(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.)

PAUL P. OFFILL

Typed or printed name of signee

#### 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)