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(((H140000310573)))

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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.

Account Number: I2000000019

Phone Fax Number : (305)552-5973 : (305)220-1440

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

Email Address:

FLORIDA LIMITED LIABILITY CO. OCEAN COVE INVESTMENTS LLC

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February 10, 2014

FLORIDA DEPARTMENT OF STATE

LAZARUS CORPORATE FILING SERVICE, Division of Corporations

SUBJECT: OCEAN COVE INVESTMENTS LLC

REF: W14000008570

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

Effective January 1, 2014, all limited liability company forms must be submitted in accordance with the Revised Limited Liability Company Act, Chapter 605, Florida Statutes.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Karen A Saly Regulatory Specialist II FAX Aud. #: H14000031057 Letter Number: 414A00002947 12/23/2031 03:51

#6468 P. 003/004 F/LED 2014 FEB 10 AM 8: 13 SECRETARY OF STATE TALL AHASSEE. FLORID,

H14000031057

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILIT

The name of the Limited Liability Company is:		
OCEAN COVE INVESTMENTS LLG		
(Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")		

ARTICLE II - Address:

Principal Office Address:

81505W 85T \$216 MIAMI FL 33144

ARTICLE I - Name:

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

8150 SW8 55 #314 MIAMI PI 33144

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: (The Limited Limited Company cannot serve as its own Registered Agent. You must designate an individual or another business craftly with an active Florida registration.)				
The name and the Flo	orida street address of the registered agent are:			
4	CARLOS R BRIZUELA-ALFARD			
	Name			
·	0,505,105 A216			

Florida street address (P.O. Box NOT acceptable) MIAMI EL 331421 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 605, F.S.

gent's Signature (REQUIRED)

(CONTINUED) H140 00031057

H14000031057.

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	Name and Address:			
æ	"MGRM" = Managing Member				
	MGRM	CARLOS R BRIZUELA-ALFARO 8150 SW 8 ST # 216 MIAMI FL 33144			
	-				
		•			
(Use attachment if necessary)					
	CLE V: Effective date, if other than the d				
(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)					
w v	and the second s				
	REQUIRED SIGNATURE				
٠.	1 Guy	or an authorized representative of a member.			
	(In accordance with section of this document constitution that the facts stated here.)	ates an attirmation under the penalties of perjury			

Filing Fees:

\$125.00 Fling Fee for Articles of Organization and Designation of Registered Agent

- \$ 30.00 Certified Copy (Optional)
- 5 5.00 Certificate of Status (Optional)

Page 2 of 2

CARLOS R. BRIZUELA Typed or printed name of signee