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SEORCIARY OF STATE FALLAHASSEE, FLORIDA

COVER LETTER

TO:	Registration Section Division of Corporations		
SUBJE	CT: Be Ocean, LLC Name of Lin	nited Liability Company	
The end	closed Articles of Organization and fee(s) as	re submitted for filing.	
Please	return all correspondence concerning this m	atter to the following:	
	Craig Kuperman	Name of Person	
		- 10110	
	Be Ocean, LLC		
	•	Firm/Company	~ 2
			2014 MAR
	1204 East Atlantic Avenue	Address	₹
		Address	AASS
	Dalas Darah El 00400		₩.~
	Delray Beach, FL 33483	City/State and Zip Code	
ore	aig@beocean.com	•	STATE STATE
باعد.	E-mail address: (to be use	d for future annual report notification)	
For fur	ther information concerning this matter, plea	ase call:	V ^{CC}
Craig	Kuperman at (917) 282-9810	
	Name of Person	Area Code Daytime Telephone I	Number
Enclose	ed is a check for the following amount:		
□ \$ 125.0	O Filing Fee	Certified Copy Cer (additional copy is enclosed) Cert	0.00 Filing Fee, tificate of Status & tified Copy onal 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

ARTICLE I - Name: The name of the Limited Liability Company is:				
Be Ocean, 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 of	office of the Limited Liability Company is	s:		
Principal Office Address:	Mailing Address:			
1204 East Atlantic Avenue Delray Beach, FL 33483	1204 East Atlantic Avenue Delray Beach, FL 33483			
ARTICLE III - Registered Agent, Registered Office, (The Limited Liability Company cannot serve as its own another business entity with an active Florida registration.) The name and the Florida street address of the registered.	Registered Agent. You must designate a on.)	n individu	al or	
OGK CREATIVE, LLC			Ξ	
Name	•	至常	HAR	
1200A East Atlantic Avenue		155	ယ်	
Florida street address (P.O. Bo	x <u>NOT</u> acceptable)	10 J	3	T
Delray Beach	FL 33483	FI.S	*	
City	Zip	콜음	@	
1 /mh	ot the appointment as registered agent and of all statutes relating to the proper and c	l agree to c complete pe	compai act in the erforma	is nce
(CONTINU	JED)			

Page 1 of 2

<u>Title:</u>	Name and Address:	
"AMBR" = Authorized Member		
"MGR" = Manager		
AMGR	Craig Kuperman	
	1204 E. Atlantic Avenue	
	Delray Beach, FL 33483	
AMGR	Yosef A. Pregadio	
	1204 E. Atlantic Avenue	
	Delray Beach, FL 33483	
AMGR	Chris Occhipinti	TAGE 1
11113011	1204 E. Atlantic Avenue	- CO
	Delray Beach, FL 33483	李州
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		SS S
		<u> </u>
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(Use attachment if necessary) EV: Effective date, if other than the date ective date is listed, the date must be sporf filing.)	of filing: <u>2/20/14</u> (C ecific and cannot be more than five business d	PTIONAL)
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