L14000084459

Office Use Only



500260143115

SOFFICIENCY OF FILING

2014 NAY 20 AN 9:54 Segretary of State Allahassee, Florida

N. Guiligan MAY 2 7 2014



ON SERVICE COMPANY
ACCOUNT NO. : I2000000195
REFERENCE : 141656 4305390
AUTHORIZATION: Spellede again
COST LIMIT : \$ 125.00
ORDER DATE: May 20, 2014
ORDER TIME : 3:46 PM
ORDER NO. : 141656-005
CUSTOMER NO: 4305390
DOMESTIC FILING
NAME: 840 OCEAN DRIVE, LLC
EFFECTIVE DATE:
ARTICLES OF INCORPORATION
CERTIFICATE OF LIMITED PARTNERSHIP XX ARTICLES OF ORGANIZATION
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:
\cdot
CERTIFIED COPY XX PLAIN STAMPED COPY
CERTIFICATE OF GOOD STANDING
CONTACT PERSON: Susie Knight - EXT. 62956
EXAMINER'S INITIALS:

141656



DEPARTMENT OF STATE

14 MAY 23 PM 4: 24

FLORIDA DEPARTMENT OF STATE Division of Corporations

May 21, 2014

CSC SUSIE KNIGHT

SUBJECT: 840 OCEAN DRIVE, LLC

Ref. Number: W14000032020

RESUBINIT

Please give original submission date as file date.

We have received your document for 840 OCEAN DRIVE, LLC and your check(s) totaling \$. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all the appropriate places. One or more words may be added to make the name distinguishable from the one presently on file. A search for name availability can be made on the Internet through the Division's records at www.sunbiz.org.

Please note the name of a limited liability company must contain the words "Limited Liability Company," the abbreviation "L.L.C.", or the designation "LLC". The following suffixes are no longer acceptable: "Limited Company," "L.C.," "LC.," "Ltd.," and "Co."

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.

Neysa Culligan Regulatory Specialist II

Letter Number: 114A00010974

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

1201 Hays Street ≥ □	ine name of the L	me: imited Liability Company is:		
The mailing address and street address of the principal office of the Limited Liability Company is: Principal Office Address: Mailing Address: 30 Mary Court Melville, NY 11747 Melville, NY 11747 ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: (The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.) The name and the Florida street address of the registered agent are: Corporation Service Company Name	840 OCEAN DR	IVE Realty, LLC (Must end with the words "l	Limited Liability Company, "L.L.C.," or "LLC.")	
30 Mary Court Melville, NY 11747 ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: (The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.) The name and the Florida street address of the registered agent are: Corporation Service Company Name 1201 Hays Street			ncipal office of the Limited Liability Company is:	
Melville, NY 11747 Melville, NY 11747 ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: (The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.) The name and the Florida street address of the registered agent are: Corporation Service Company Name 1201 Hays Street	Principal Office A	ddress:	Mailing Address:	
(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.) The name and the Florida street address of the registered agent are: Corporation Service Company Name 1201 Hays Street		47		
Name 20 III				
Name 20 III	(The Limited Liabi	ility Company cannot serve as i	its own Registered Agent. You must designate an in	
Name 1201 Hays Street 1201 Hays Street	(The Limited Liabi another business e	lity Company cannot serve as intity with an active Florida reg	its own Registered Agent. You must designate an in istration.)	
——————————————————————————————————————	(The Limited Liabi another business e	lity Company cannot serve as intity with an active Florida reg	its own Registered Agent. You must designate an in distration.) distered agent are:	FIL SLUNTIAN SALUNTAN SALUNTAN
Florida street address (P.O. Box NOT acceptable)	(The Limited Liabi another business e	Plity Company cannot serve as intity with an active Florida regularity with an active Florida regularity with an active Florida street address of the regularity Corporation Service Co	its own Registered Agent. You must designate an in distration.) distered agent are:	PILLE 2011 HAY 20 SALUNCTARY O
Tallahassee FL 32301	(The Limited Liabi another business e	Elity Company cannot serve as intity with an active Florida reg Florida street address of the reg Corporation Service Co	its own Registered Agent. You must designate an instration.) gistered agent are: propany Name	PILED MALAHASSEE, FL
City Zip	(The Limited Liabi another business e	Plity Company cannot serve as intity with an active Florida reg Florida street address of the reg Corporation Service Co 1201 Hays Street Florida street address (P.	its own Registered Agent. You must designate an instration.) gistered agent are: company Name O. Box NOT acceptable)	PILLED 2011 HAY 20 AM 9: SALUMITARY OF STATI TAIL AMASSEE, FLOR

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..

Corporation Service Company

Doew S. Theuli don't V.P. By:

Registered Agent's Signature (REQUIRED)

Doreen S. Haeselin, Asst. VP

(CONTINUED)

Page 1 of 2

2014	
	•
20	1
E	
ب	

	<u>Title:</u> "AMBR" = Authorized Member	Name and Address:
	"MGR" = Manager AMBR	T&G Realty Partners, LLC 30 Mary Court Melville, NY 11747
		
	(Use attachment if necessary)	
If an ef	LE V: Effective date, if other than the date of filing: Tective date is listed, the date must be specific and of filing.)	. (OPTIONAL) I cannot be more than five business days prior to or 90 days after
	LE VI: Other provisions, if any.	

Signature of a member or an authorized representative of a member.
(In accordance with section 605.0203 (1) (b), 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.)

Kim McEllen, Authorized Representative

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)