

L1400000089535

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(Address)

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JUN 04 2014

J. BRUCE

**DAVID W. CRAFT, P.A.**

Attorney at Law  
3418 Poinsettia Avenue  
West Palm Beach, Florida 33407  
Phone (561) 844-3131  
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E-Mail [office@davidcraftlaw.com](mailto:office@davidcraftlaw.com)

Attorney:  
David W. Craft

Paralegal:  
Leslie P. Ginocchio

May 22, 2014

Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

Federal Express

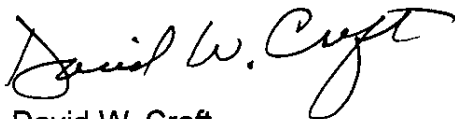
**Re: Ocean Way Properties, LLC**

The enclosed Articles of Organization are submitted for filing together with my Check No. 12519 in the amount of \$125.00 for the filing fee.

Please return all correspondence concerning this matter to this office.

Please call if there are any questions or problems in this regard. Thank you for your attention to this matter.

Sincerely,



David W. Craft

DWC:cac

Encls.

OCEAN WAY=Div Corps.ltr

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CLERK OF SUPERIOR COURT  
TALLAHASSEE, FLORIDA

**ARTICLES OF ORGANIZATION FOR FLORIDA  
LIMITED LIABILITY COMPANY**

**ARTICLE 1 – Name:**

The name of the Limited Liability Company is: **OCEAN WAY PROPERTIES, LLC.**

**ARTICLE II – Address:**

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

**Principal Office/Address:**

5390 Georgia Avenue  
West Palm Beach, FL 33405

**Mailing Address:**

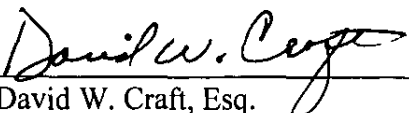
5390 Georgia Avenue  
West Palm Beach, FL 33405

**ARTICLE III – Registered Agent, Registered Office, & Registered Agent's Signature:**

The name and the Florida street address of the registered agent are:

David W. Craft, Esq.  
3418 Poinsettia Avenue  
West Palm Beach, FL 33407

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..

  
David W. Craft, Esq.

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TALLAHASSEE FLORIDA

**ARTICLE IV –**

The name and address of each person authorized to manage and control the Limited Liability Company:

**Title:**

**Name and Address:**

“AMBR” = Authorized Member

“MGR” = Manager

MGR

Timothy Givens

5390 Georgia Avenue

West Palm Beach, FL 33405

MGR

Philip S. Cambo

1290 Park Street

Palmer, MA 01069

**SIGNATURE:**

  
\_\_\_\_\_  
Timothy Givens, MGR

(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.)

Timothy Givens

Typed or printed name of signee

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