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PICK-UP	☐ WAIT	MAIL
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Certified Copies	Certificates	s of Status
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## **COVER LETTER**

	Registration Section Division of Corporations		
SUBJEC	The Ocean Group T:		
Sebuce		e of Limited Liab	pility Company
The enclo	sed Articles of Organization and f	ec(s) are submitt	ed for filing.
Please ret	urn all correspondence concerning	g this matter to the	e following:
	Niurka Palomino, MBA		
		Name	of Person
	The Ocean Group, LLC		
		Firm/0	Company
	26 NW 47th Avenue # 202		
		Ad	dress
	Miami, FL 33126		
	nikipalomino@yahoo.com	City/State	and Zip Code
		be used for futur	e annual report notification)
For further	information concerning this matte	r, please call:	
	Niurka Palomino	786 at (	413-5997
	Name of Person	Area Code	Daytime Telephone Number
Enclosed	is a check for the following amou	nt:	
\$125.001	Filing Fee \$130.00 Filing F Certificate of St	atus LauCert	5.00 Filing Fee & S160.00 Filing Fee, ified Copy onal copy is enclosed) Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Address		Street Address
	New Filing Section Division of Corporations		New Filing Section Division of Corporations
	P.O. Box 6327 Clifton Building Tallahassee, FL 32314 2661 Executive Center Circle		

Tallahassee, FL 32301



# FLORIDA DEPARTMENT OF STATE Division of Corporations

August 18, 2016

NIURKA PALOMINO, MBA 26 NW 47TH AVE #202 MIAMI, FL 33126

SUBJECT: THE OCEAN GROUP, LLC

Ref. Number: W16000057588

16 AUG 29 PH 12: 39

\*\*\*\*

We have received your document for THE OCEAN GROUP, LLC and your check(s) totaling \$155.00. 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 appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

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) 245-6052.

Jessica A Fason Regulatory Specialist II

Letter Number: 316A00017562



#### FLORIDA DEPARTMENT OF STATE **Division of Corporations**

September 6, 2016

NIURKA PALOMINO, MBA 26 NW 47TH AVE #202 MIAMI, FL 33126

SUBJECT: THE OCEAN GROUP, LLC

Ref. Number: W16000057588

Confirmation number: 800288381108 Pin Number: CORP

Trange Team, U We have received your document for THE OCEAN-GROUP, LLC and your check(s) totaling \$155.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of the entity cannot include "CORP." This word/abbreviation is readily associated with or is commonly used to denote another type of entity. Please amend your document throughout accordingly.

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 appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

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) 245-6052.

Jessica A Fason Regulatory Specialist II

Letter Number: 316A00017562

## AKTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

17. , 😎

ARTICLE I - Name: The name of the Limited Liabilit	y Company is:	The Oce	an Investment T	Team, LLC
The Ocean Group, LI (Must end	LC The with the words "Limited	2 Ocea. Liability Compan	an Investment T Threstment T. y, "L.L., for "LLC.")	ean, LC
ARTICLE II - Address: The mailing address and street ad			•	
<u>Princip</u> :	al Office Address:		Mailing Address:	
26 NW 47th Avenue #202 Miami, FL 33126			26 NW 47th Avenue #202 Miami, FL 33126	
ARTICLE III - Registered Age (The Limited Liability Company another business entity with an a	cannot serve as its own	Registered Agent	e <b>nt's Signature:</b> You must designate an individual e	or
The name and the Florida street	address of the registered	agent are:		
	Niurka Palomino, ME			
	Name			
	26 NW 47th Avenue #202  Florida street address (P.O. Box NOT acceptable)			
			·	
	Miami City	FL State	33126 Zip	
lace designated in this certificate, arther agree to comply with the pr	I hereby accept the apportions of all statutes realigations of my position of	ointment as registe lating to the prope as registered agen	ne above stated limited liability compred agent and agree to act in this caser and complete performance of my of as provided for in Chapter 605, F.S.	ipacity. I duties, and I

	-		-			
А	K.	П		IΓ	-13	/-

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

Title: "AMBR" = Authorized Member	Name and Address:
"MGR" = Manager MGR	Niurka Palomino, MBA 26 NW 47th Avenue #202
	Miami, FL 33126
MGR	Valia Garzon  2727 Merrilee Drive, # 338  Fairfax, VA 22031
(Use attachment if necessary)	
If an effective date is listed, the date must he date of filing.)	be date of filing:
ARTICLE VI: Other provisions, if any.	
REQUIRED SIGNATURE:	
This document is I am aware that an	of a member or an authorized representative of a member. executed in accordance with section 605.0203 (1) (b), Florida Statutes.  ny false information submitted in a document to the Department of State degree felony as provided for in s.817.155, F.S.

Filing Fees:

Typed or printed name of signee

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent \$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)

Niurka Palomino