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PICK-UP	WAIT	MAIL
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M. MOON JUN 3 0 2017 CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301

Phone: 850-558-1500
ACCOUNT NO. : 12000000195
REFERENCE: 707247 4301225
AUTHORIZATION : Type In Il o mo
COST LIMIT : \$`125.00
ODDDD D1MD - T 20 2017
ORDER DATE: June 30, 2017
ORDER TIME : 1:31 PM
ORDER NO. : 707247-005
CUSTOMER NO: 4301225
DOMESTIC FILING
NAME: ORCAL LLC
EFFECTIVE DATE:
ARTICLES OF INCORPORATION CERTIFICATE OF LIMITED PARTNERSHIP XX ARTICLES OF ORGANIZATION
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:
CERTIFIED COPY XX PLAIN STAMPED COPY CERTIFICATE OF GOOD STANDING
CONTACT PERSON: Melissa Zender - EXT.

EXAMINER'S INITIALS:

COVER LETTER

SUBJECT	ORCAL LLC
SUBSECT	Name of Limited Liability Company
The enclos	ed Articles of Organization and fee(s) are submitted for filing.
Please retu	rn all correspondence concerning this matter to the following:
	Stivens Ovalle
	Name of Person
	Arnold & Porter Kaye Scholer LLP
	Firm/Company
	250 West 55th Street
	Address
	New York, New York 10019-9710
	City/State and Zip Code
	E-mail address: (to be used for future annual report notification)
or further i	nformation concerning this matter, please call:
	Stivens Ovalle 212 836-7793 at (
	Name of Person Area Code Daytime Telephone Number
Unalamedi	s a check for the following amount:
	·
]\$125.00 F	ling Fee S130.00 Filing Fee & S155.00 Filing Fee & Certificate of Status Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)

Mailing Address

New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Street Address

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

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ORCAL LLC	ntain the words "Limited	Linkilin Commons	21 1 C " or 21 1 C "	·
(Must co	main the words. Limited	тлавину Сошрану.	, LLC, OF LLC.	1
ARTICLE II - Address: The mailing address and street	address of the principal c	office of the Limited	I Liability Company	is:
Princ	pal Office Address:		Mailing .	Address:
1395 Brickell Ave.	Suite 800		5 Brickell Ave., Suit	e 800
Miami, FL 33131		Mic	ımi, FL 3 <u>3131</u>	
	Corporation Service 1201 Hays Street	Name		_
	Florida street addres	ss (P.O. Box <u>NOT</u> :	icceptable)	_
	Tallahassee	FL	32301	<u>.</u>
	City	State	Zip	
Having been named as registere place designated in this certifica further agree to comply with the am familiar with and accept the	te, I hereby accept the app provisions of all statutes r	pointment as register relating to the proper as registered agent rice Company	red agent and agree to r and complete perfor	o act in this capacity. I rmance of my duties, and I
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Page 1 of 2

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ARTICLE IV-