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(Requestor's Name)
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PICK-UP WAIT MAIL
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CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2000000195	
REFERENCE: 955080 4369157	
AUTHORIZATION: Judo Blemon	
COST LIMIT : \$\frac{1}{125}.00	
ORDER DATE : December 13, 2017	
ORDER TIME : 9:45 AM	
ORDER NO. : 955080-005	<u>.</u>
CUSTOMER NO: 4369157	
Ć:)
DOMESTIC FILING	
NAME: SECOND BEACH, 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: Roxanne Turner - EXT.	
EXAMINER'S INITIALS:	

COVER LETTER

	ew Filing Section livision of Corporations	
CHDIECT		OND BEACH, LLC
SUBJECT		imited Liability Company
The enclos	sed Articles of Organization and fee(s)	are submitted for filing.
Please retu	im all correspondence concerning this r	matter to the following:
		Richard Ruben
		Name of Person
	d	o Ruben Companies
		Firm/Company
	600 N	Madison Avenue, 11th Floor
		Address
	N	Address ew York, New York 10022 City/State and Zip Code nvestments@rubenco.com ed for future annual report notification)
		City/State and Zip Code
-	·····	nvestments@rubenco.com d for future annual report notification)
For further in	nformation concerning this matter, plea	ise call:
	Perry Kamerman	212 293-9400
		Area Code Daytime Telephone Number
Enclosed is	s a check for the following amount:	
S 125.00 Fi	ling Fee \$130.00 Filing Fee & Certificate of Status	\$155.00 Filing Fee & S160.00 Filing Fee, 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

	S	Second Beach, LLC			
(Must co	ontain the words "Limited				
ARTICLE II - Address: The mailing address and stree	t address of the principal c	office of the Limited	Liability Company is:		
<u>Princ</u>	cipal Office Address:		Mailing Add	ress:	
c/o Ruben Comp	c/o Ruben Companies		c/o Ruben Companies		
600 Madison Ave	enue, 11th Floor	600	600 Madison Avenue, 11th Floor		
New York, New Y	York 10022	New_	York, New York 1002	22	
•	et address of the registered Corporation Service	d agent are: e Company	You must designate an in	MITTALE OF	
•	et address of the registered	d agent are:		NIVINIZI VI	
•	et address of the registered	d agent are; e Company Name			
•	et address of the registered Corporation Service 1201 Hays Street	d agent are; e Company Name			
mother business entity with a	Corporation Service 1201 Hays Street Florida street addres	d agent are; e Company Name s (P.O. Box NOT ac	cceptable)		

Name and Address: "AMBR" = Authorized Member "MGR" = Manager Richard Ruben MGR c/o Ruben Companies 600 Madison Avenue, 11th Floor, NY, NY 10022 (Use attachment if necessary) ARTICLE V: Effective date, if other than the date of filing: _. (OPTIONAL) (If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records. ARTICLE VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a member or an authorized representative of a member. This document is executed in accordance with section 605.0203 (1) (b). Florida Statutes. 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. Richard Ruben, Manager Typed or printed name of signee Filing Fees: \$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

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

ARTICLE IV-

\$ 30.00 Certified Copy (Optional)\$ 5.00 Certificate of Status (Optional)