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CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee. FL 32301

Tallhassee, FL 32301 Phone: 850-558-1500

PHONE. 830-338-1300
ACCOUNT NO. : I2000000195
REFERENCE: 216545 4329691
AUTHORIZATION CAMERACLES A
COST LIMIT : \$ 125.00
ORDER DATE : May 17, 2018
ORDER TIME : 11:40 AM
ORDER NO. : 216545-005
CUSTOMER NO: 4329691
DOMESTIC FILING
NAME: BOBBY SEA 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: Emily Croft - EXT. 62925

EXAMINER'S INITIALS:

## **COVER LETTER**

TO:	New Filing Section Division of Corporations			
SUBJE	CT: BOBBY SEA LLC			\$ 5 B
	Name	of Limited Liab	ility Company	等差二
	losed Articles of Organization and federation and federation all correspondence concerning t			18 HAY 17 PH 4: 21
	Ana L Zampino			2
		Name o	f Person	
	John P Zampino PC			
		Firm/Co	ompany	<del></del>
	405 Lexington Avenue, RM 5002			
		Addr	ess	<del></del>
	New York, New York 10174			
	ana@jzampino.com	City/State an	d Zip Code	
	E-mail address: (to be	used for future a	nnual report notification)	<del></del>
For further i	information concerning this matter, p	lease call:	,	
	Ana L Zampino at	212	808-4600	
	Name of Person	Area Code	Daytime Telephone Number	
Enclosed is	s a check for the following amount:			
	ling Fee S130.00 Filing Fee & Centificate of Status	L_J <sub>Certifie</sub>	Filing Fee & S160.00 Filing d Copy Certificate of S Certified Copy (additional copy is	tatus &
	Mailing Address New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	N D C 20	treet Address few Filing Section fivision of Corporations fifton Building for Executive Center Circle for Bushassee, F1, 32301	

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:				
The name of the Limited Liabil.	ity Company is:			•
BOBBY SEA LLC				
	tain the words "Limite	d Liability Commen	". "L.L.C.," or "LLC.")	
	is in the second is in the	о слаонну сотрану	A "LataCa, or "LLC.")	
ARTICLE II - Address:				5 c 6
The mailing address and street a	ddress of the principal	office of the Limite	d Liability Company is:	
			, see party and	
Princip	al Office Address:		Mailing Address:	
1515 North Federal I	Highway	151	· <del></del>	18 HAY 17 PH 4: 2
Suite 206			5 North Federal Highway te 206	
Boca Raton, FL 334.	3.2		a Raton, FL 33432	
A DITICUITA NA				<u> </u>
ARTICLE III - Registered Age (The Limited Liability Company)	ent, Registered Office	. & Registered Age	nt's Signature:	:
. Santa Company	Cannot Serve as its on	The Manuel August and the same	nt's Signature: You must designate an individual	. Ar
another business entity with an a	ictive Florida registrati	ion.)	designate an morvidual	CH .
The name and the Plant I are				
The name and the Florida street a	address of the registere	ed agent are:		
	Corporation Service	: Company		
		Name		
	1201 Hays Street			
		ss (P.O. Box <u>NOT</u> a		
	meet uddic.	55 (1 .O. DOX <u>210 [</u> a	cceptable)	
	Tallahassee	FL_	32301	
	City	State	Zip	
avino heen named as varietimed			·	
ace designated in this continues	gent and to accept serv	ice of process for the	above stated limited liability comp	oany at the
rther agree to comply with the pre-	nereny accept the app	Ointment as registere	above stated limited liability comp ed agent and agree to act in this ca	pacity, I
n familiar with and accept the obli	ivisions of all statutes r	elating to the proper	ed agent and agree to act in this ca and complete performance of my c	luties, and I
The state of the s	Corporation Servi	из гехізитей аветра	and complete performance of my one provided for in Chapter 605, F.S.	î.
	Conposation	ce Company	Emily	Croft
	_Bv: \( \sum_{\infty} \)	$\alpha(U_{in})$	101 t	Civit
	Regist	ered Avent's Stonet	ire (REDUIRED) Asst. Vice	President
	- 142	and recit a signati	ine (KED) 7 1000. VIOC	11401001
		$\bigcup$	//	
		(CONTINUED)	V	

Awing = Authorized Member MGR = Manager MGR   1515 North Federal Highway, Suite 206   Boca Raton, FL 33432   1515 North Federal Highway, Suite 206   Boca Raton, FL 33432   1515 North Federal Highway   1515 North Federal	Title:	Name and Address:
MGR  Mr. Robert B. Campbell  JS15 North Federal Highway. Suite 206  Boca Ration. FL 33432  V: Effective date. if other than the date of filing:  (OPTIONAL)  filing.)  W: Effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 de date is listed, the date must be specific and cannot be more than five business days prior to or 90 de date inserted in this block does not meet the applicable statutory filing requirements, this date will not be mit's effective date on the Department of State's records.  VI: Other provisions, if any.  COURRED SIGNATURE:  Signature of a member of an authorized representative of a member.  This document is deveated in accordance with section 608.0203 (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.  Ana I. Zampino, Authorized Representative  Typed or printed name of signee  Filing Fees:  125.00 Filing Fee for Articles of Organization and Decirity of the property of the printed for the printe	"AMBR" = Authorized Member	Chaire and Address.
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ARTICLE IV-