LECCC	229	920	
(Requestor's Name) (Address) (Address)	100318995361		
(City/State/Zip/Phone #)	03/27/180100)3015 ++125.00	
Certified Copies Certificates of Status	K PAGE	JIVISION DE CORPORATION: 18 SEP 27 PH 1: 18 Jacoba LARY OF STATE TALLAHASSEE, FLORIDA	

Office Use Only

COVER LETTER

	COVER LETTER
	w Filing Section vision of Corporations
	5440 Ocean Drive, LLC
SUBJECT:	Name of Limited Liability Company
The enclose	ed Articles of Organization and fee(s) are submitted for filing.
Please retur	n all correspondence concerning this matter to the following:
	Joseph Thoemke
	Name of Person
	Firm/Company
	5790 Dixie Bell Road
	Address
	Palm Beach Gardens, FL 33418
1	City/State and Zip Code nradke@felhaber.com
	E-mail address: (to be used for future annual report notification)
	formation concerning this matter, please call:
-	Joseph Thoemke 561 627-9563 at ()
	Name of Person Area Code Daytime Telephone Number
Enclosed is	a check for the following amount:
▼\$125.00 Fil	ling Fee \$130.00 Filing Fee & S155.00 Filing Fee & S160.00 Filing Fee Certificate of Status (additional copy is enclosed) Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)
	Mailing AddressStreet AddressNew Filing SectionNew Filing SectionDivision of CorporationsDivision of Corporations
	P.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

5440 Ocean Drive, LLC

(Must contain the words "Limited Liability Company, "L.L.C.," or "LLC.")

ARTICLE II - Address:

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

Principal Office Address:	Mailing Address:	
5790 Dixie Bell Road	5790 Dixie Bell Road	
Palm Beach Gardens, FL 33418	Palm Beach Gardens, FL 33418	

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

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

Joseph Thoemke		
	lame	
5790 Dixie Bell Road		
Florida street address (P.O. Box <u>NOT</u> ac	ceptable)
Palm Beach Gardens	FL	33418
City	State	Zip

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..

Registered Agent's Signature (REQUIRED)

(CONTINUED)



ARTICLE IV-

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

<u>Title:</u> "AMBR" = Authorized Member	Name and Address:
"MGR" = Manager	
MGR	Joseph Thoemke
	5790 Dixie Bell Road
	Palm Beach Gardens, FL 33418
	······································
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(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.)

<u>Note:</u> 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 mer This document is executed in accordance with section 605.0203 (1) (b). F I am aware that any false information submitted in a document to the Depa	lorida Statute	
constitutes a third degree telony as provided for in 5.817.155, F.S.		
Joseph Thoenke	-	
Typed or printed name of signee		18
Filing Fees:		SEP
\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agen	E ST	σ
S 30.00 Certified Copy (Optional)	Si Si	27
\$ 5.00 Certificate of Status (Optional)	<u>ع</u> بياً	~
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