

2/21/2019

Division of Corporations

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

L19000047255

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To:
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Fax Number : (850)617-6381

From:
Account Name : LEGALINC CORPORATE SERVICES INC.
Account Number : I20180000011
Phone : (844)386-0178
Fax Number : (214)317-4754

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

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**FLORIDA LIMITED LIABILITY CO.
OCEAN JOURNEY, LLC**

Certificate of Status	0
Certified Copy	1
Page Count	02
Estimated Charge	\$155.00

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To: 12143174754 From: +Restricted Date: 02/22/19 Time: 9:05 AM Page: 01
850-617-8381 2/22/2019 12:05:27 PM PAGE 1/001 Fax Server



February 22, 2019

FLORIDA DEPARTMENT OF STATE
Division of Corporations

LEGALINC CORPORATE SERVICES INC.

SUBJECT: OCEAN JOURNEY, LLC
REF: W19000017654

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

Effective January 1, 2014, all limited liability company forms must be submitted in accordance with the Revised Limited Liability Company Act, Chapter 605, Florida Statutes.

If you have any further questions concerning your document, please call (850) 245-6052.

KYLE D BRUMBLEY
Regulatory Specialist II
New Filing Section

FAX Aud. #: H19000060263
Letter Number: 919A00003807

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ARTICLES OF ORGANIZATION
FOR
OCEAN JOURNEY, LLC

ARTICLE I – Name:

The name of the Limited Liability Company is:

OCEAN JOURNEY, LLC

ARTICLE II – Address:

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

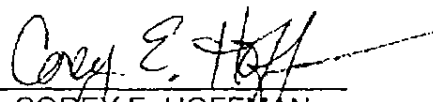
120 RIVERVIEW DR., SUWANNEE, GA 33024

ARTICLE III – Registered Agent, Registered Office and Registered Agent's
Signature:

Corey E. Hoffman, Esq.
3250 Mary Street
Suite 303
Coconut Grove, FL 33133

Having been named as registered agent and to accept or 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..

COREY E. HOFFMAN

By: 
COREY E. HOFFMAN
Registered Agent

ARTICLE IV – Manager(s) or Managing Members

The name and address of each Manager or Managing Member is as follows:

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Title:

"MGR"= Manager

"MGRM"= Managing Member

Name and address:

MGRM

KATHRYN BOYCE
120 RIVERVIEW DR.,
SUWANNEE, GA 33024

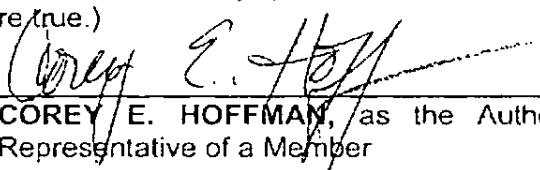
MGRM

RONALD BOYCE
120 RIVERVIEW DR.,
SUWANNEE, GA 33024

ARTICLE V – CONTINUATION AFTER VOLUNTARY TERMINATION

In the event of termination of the Limited Liability Company due to death, retirement, resignation, bankruptcy or dissolution of a Member or any other event which involuntarily terminates the Limited Liability Company, then in that event, the remaining and/or surviving Members shall be fully entitled to continue the business of the Limited Liability Company provided that 100% of the ownership interests then remaining shall have agreed to do so in writing.

(In accordance with section 605, Florida Statutes, the execution of this document constitutes an affirmation under penalties of perjury that the facts stated herein are true.)


COREY E. HOFFMAN, as the Authorized
Representative of a Member