3/22/2021

Page: 2 of 4 2021-03-22 14:13:31 GMT

Florida Department of State Division of Corporations

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H21000114269 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (859)617-6331

Fcom:

Account Name : EXPRESS CORPORATE FILING SERVICE INC.

Account Number : I20000000146 Phone : (305)444-4994

Fax Number : (305)444-4977

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

Email Address:\_\_

From: Yanet Avila

## FLORIDA LIMITED LIABILITY CO. 1 OCEAN LLC

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$155.00

Electronic Filing Menu Corporate Filing Menu

Help

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLEO	ORCELOSITION			
ARTICLE I - Name:				
The name of the Limited Liabili	ty Company is:			
	•			
1 OCEAN LLC				
(Must con	tain the words "Limite	d Liability Comp	pany, "L.L.C.," or "LLC.")	
ARTICLE II - Address: The mailing address and street a	ddress of the principa	l office of the Li	nited Liability Company is:	
Princip	al Office Address:		Mailing Address:	
6455 ALLISON RD			6455 ALLISON RD.	
MIAMI BEACH, FI	. 33141	<del></del>	MIAMI BEACH, FL 33141	
ARTICLE III - Registered Ag (The Limited Lizbility Compan- another business entity with an	y cannot serve as its o	wn Registered As	Agent's Signature: gent. You must designate an individu	al or
The name and the Florida street	address of the registe	red agent are:		
	NOVELA LAW, I	P.A.		
		Name		
	1001 BRICKELL	BAT DRIVE ST	E 1200	
	Florida street add	ress (P.O. Box N	OT acceptable)	
	МІАМІ	FL	33131	

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.,

State

MIAMI

City

Zip

(CONTINUED)

Page: 4 of 4

From: Yanet Avila

Title: "AMBR" = Authorized Member	Name and Address:
"MGR" ⇒ Manager <u>MGR</u>	SIERRA DREW SMEBAKKEN 6455 ALLISON RD. MIAMI BEACH, FL. 33141
(Use attachment if necessary)	ate of filling: (OPTIONAL)
effective date is listed, the date must be te of filing.)	specific and cannot be more than five business days prior to or 90 da of meet the applicable statutory filing requirements, this date will not be
CLE VI: Other provisions, if any.	
REQUIRED SIGNATURE:	0, 1

Filing Fees:

Typed or printed name of signee

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

SHERRA DREW SMEBAKKEN

constitutes a third degree felony as provided for in \$.817.155, F.S.

- \$ 30.00 Certified Copy (Optional)
- 8 5.00 Certificate of Status (Optional)