## La1000231861

| (Requestor's Mame)                      |
|---|
| (Address)                               |
| (Address)                               |
| (City/State/Zip/Phone #)                |
| P-C, JP WAIT MAIL                       |
| (Business Entity Name)                  |
| (Document Number)                       |
| Certified Copies Certificates of Status |
| Special Instructions to Fiting Officer  |
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|   |
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|   |

Office Use Only



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115 N CALHOUN ST., STE. 4 TALLAHASSEE, FL 32301 P: 866.625.0838 F: 866.625.0839 COGENCYGLOBAL.COM

Account#: I20000000088

| Date:05/1   | 19/2021                             |                             |
|---|-------------------------------------|-----------------------------|
| Name: Mare  | cel Ogbonna-Amu                     |                             |
| Reference #:                                      | 1376118                             |                             |
| Entity Name:                                      | NORTH OCEAN MANA                    | AGEMENT, LLC                |
| <ul><li>Articles of I</li><li>Amendment</li></ul> | Incorporation/Authorization to Tran | sact Business               |
| Change of   | Agent                               | ANY ISSUES, CALL<br>MARCEL: |
| Reinstaten  | nent                                | (518) 213 - 0826            |
| Conversion  | ١                                   | Thank you!                  |
| Merger  |                                     |                             |
| Dissolution                                       | /Withdrawal                         |                             |
| ☐ Fictitious N                                    | lame                                |                             |
| Other   |                                     |                             |
|   |                                     |                             |
| Authorized Amour                                  | nt:\$125.00                         |                             |
| Signatura:  | Marcel og homes time                |                             |

F: +852.2682.9790

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

2021 MAY 19 PA 12: 01 SACLAS ANATE

## ARTICLE I - Name:

The name of the Limited Liability Company is:

| NUBREH | OCEAN | MANAGEM | IENT, LLC |
|--------|-------|---------|-----------|
|        |       |         |           |

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

ARTICLE II - Address:

| Princip   | al Office Address:   |                                  | Mailing Address: 204 EAGLE DRIVE                           |  |
|---|--|----------------------------------|--|--|
| 204 EAGLE DRIVE   |  | 20                               |  |  |
| JUPITER, FL. 33477  |  | <u>ji</u>                        | JUPITER, FL. 33477   |  |
| The Limited Liability Company nother business entity with an                                  | y cannot serve as its own<br>active Florida registration                           | Registered Agen<br>m.)           | gent's Signature:<br>t. You must designate an individual o |  |
| nother business entity with an  | active Florida registratic   | on.)<br>Lagent are:              | t. You must designate an individual of                     |  |
| nother business entity with an  | active Florida registratic<br>address of the registered                            | on.)<br>Lagent are:              | t. You must designate an individual of                     |  |
| nother business entity with an  | active Florida registratic<br>address of the registered                            | I agent are:  I Name             | t. You must designate an individual of                     |  |
| nother business entity with an  | active Florida registratic<br>address of the registered<br>YORAM SHEMESE           | on.)<br>Lagent are:<br>H<br>Name | t. You must designate an individual of                     |  |
| The Limited Liability Company another business entity with an The name and the Florida street | active Florida registratic address of the registered YORAM SHEMESE 204 EAGLE DRIVE | on.)<br>Lagent are:<br>H<br>Name | t. You must designate an individual of                     |  |

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.,

> /s/ Yoram Shemesh Registered Agent's Signature (REQUIRED)

> > (CONTINUED)

| 4 | D | TI | í | ľ | F., | IV- |
|---|---|----|---|---|-----|-----|
|   |   |    |   |   |     |     |

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

| Title:                               | Name and Address:   |
|--------------------------------------|---|
| "AMBR" = Authorized Men              | ber   |
| "MGR" = Manager                      |   |
|                                      | GLOBE MANAGEMENT, LLC   |
| <u>AMBR</u>                          | 204 FAGLE DRIVE   |
|                                      | JUPITER, FL. 33477  |
|                                      | <u> </u>  |
|                                      | BLT AMERICAN BRASSERIE INC.  50 WEST 29TH ST.  NEW YORK, NY 10001   |
| <u> AMBR</u>                         | 50 WEST 29TH ST.  |
|                                      | NEW YORK, NY 10001  |
|                                      | M. COM. CO.   |
|                                      | · · · · · · · · · · · · · · · · · · ·   |
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|                                      |   |
|                                      |   |
| n effective date is listed, the date |   |
|                                      |   |
| This docum                           | ture of a member or an authorized representative of a member. ent is executed in accordance with section 605.0203 (1) (b). Florida Statutes, that any false information submitted in a document to the Department of State a third degree felony as provided for in s.817.155, F.S. |
| <u>YOE</u>                           | AM SHEMESH  Typed or printed name of signee   |
|                                      | Typed or printed name of signee   |

Filing Fees:

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

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)