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Certified Copies	_ Certificates	s of Status
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Sign of Others



CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301

Phone: 850-558-1500 ACCOUNT NO. : I2000000195 REFERENCE: 845555 4727100 AUTHORIZATION : , ORDER DATE: June 4, 2021 ORDER TIME : 9:55 AM ORDER NO. : 845555-005 CUSTOMER NO: 4727100 DOMESTIC FILING NAME: 2040 OCEAN CLUB 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: Eyliena Baker - EXT.

EXAMINER'S INITIALS:

## **COVER LETTER**

	New Filing Section Division of Corporations			
SUBJECT	2040 Ocean Club LLC			
SOBJEC		mited Liabilit	y Company	<del></del>
The enclos	sed Articles of Organization and fee(s) an	re submitted t	or filing.	
Please rett	urn all correspondence concerning this m	atter to the fo	llowing:	
	Kathy Landicho			
		Name of I	Person	· · · · · · · · · · · · · · · · · · ·
	Offit Kurman, P.A.			
		Firm/Con	npany	
	8850 Stanford Blvd., Suite 2900			
		Addre	SS	·
	Columbia, MD 21045			•
		City/State and	Zip Code	
	Robert.Graybill@fmssolutions.com  E-mail address: (to be used	I Con Gutuno au	nual manart natificati	
For further i	information concerning this matter, pleas		nuai report nouncau	
	Kathy Landicho 3	01	575-0303	C
		rea Code	Daytime Telephone	Number
Enclosed i	s a check for the following amount:			
<b>■</b> \$125.00	O Filing Fee   \$\Bigcup \\$130.00 \text{ Filing Fee & Certificate of Status}\$	Certifie	00 Filing Fee & d Copy copy is enclosed)	☐\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Address New Filing Section		treet Address lew Filing Section Di	vision
	Division of Corporations P.O. Box 6327	Ţ	he Centre of Tallaha 415 N. Monroe Stree	ssee

Tallahassee, FL 32303

Tallahassee, FL 32314

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

(Mu			
<del>-</del>	st contain the words "Limited Liabi	lity Company,	"L.L.C.," or "LLC.")
TICLE II - Address:			
e mailing address and s	treet address of the principal office	of the Limited	Liability Company is:
<u>P</u>	rincipal Office Address:		Mailing Address:
2765 Dina Ch.		3755	5 Pine Street
3755 Pine Stre	et et	3133	
Big Pine Key,  RTICLE III - Register he Limited Liability Co other business entity w	ed Agent, Registered Office, & Rempany cannot serve as its own Register an active Florida registration.)	Big l egistered Agen istered Agent. Y	Pine Key, FL 33334  nt's Signature: You must designate an individual o
Big Pine Key,  RTICLE III - Register he Limited Liability Co other business entity w	ed Agent, Registered Office, & Rompany cannot serve as its own Register and active Florida registration.)  street address of the registered age	Big l egistered Agen istered Agent. Y	nt's Signature:
Big Pine Key,  RTICLE III - Register he Limited Liability Co other business entity w	ed Agent, Registered Office, & Rempany cannot serve as its own Register and active Florida registration.)  street address of the registered age  Robert Graybill	Big l egistered Agen istered Agent. Y	nt's Signature:
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Robert Graybill, Resident Agent (CONTINUED)

Registered Agent's Signature (REQUIRED)

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

4 A A 673 73 9 9 9 4 1 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4	
"AMBR" = Authorized Member	
"MGR" = Manager	
MGR	Robert Graybill
	3755 Pine Street
	Big Pine Kev, FL 33334
MGR	Daria Gravill
	3755 Pine Street
	Big Pine Key, FL 33334
	<del></del>
Use attachment if necessary)	
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