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NAME: 1380 S OCEAN CORNER, LLC

TYPE OF FILING: ARTICLES

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AUTHORIZATION: ABBIE/PAUL HODGE

attodge

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY	
ARTICLE I - Name: The name of the Limited Liability Company is:	ED
	7072 418 -4 AM 9: 06
1380 S Ocean Corner, ELC	
(Must contain the words "Limited Liability Company, "L.L.C.," or "LLC.")	Y OF STATE
ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is:	
Principal Office Address: Mailing Addr	<u>'ess</u> :
1380 S. Ocean Blvd., Unit W401. 6830 N. Federal Hwy.,	
Pompano Beach, FL 33062 Boca Raton, FL 33487	

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:

The Presser Law Fir	m, P.A.	
	Name	-
6830 N. Federal Hw	Ύ.,	
Florida street addre	ss (P.O. Box <u>NOT</u> ac	cceptable)
Boca Raton	FL	33487
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..

Hellel Presser, Pres
Registered Agent's Signature (REQUIRED)

(CONTINUED)

Title:		Name and Address:
"AMBR" = Authoriz "MGR" = Manager	red Member	
MGR		Hillel L. Presser
		6830 N. Federal Hwy., Boca Raton, FL 33487
		7927
	<u></u>	
-		
		9: 06 STATE E. FL
		THE OB
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LE V: Effective date,	if other than the date the date must be spo	of filing: (OPTIONAL) ecific and cannot be more than five business days prior to or 90 days
of filing.) If the date inserted in tument's effective date	on the Department	neet the applicable statutory filing requirements, this date will not be it of State's records.
of filing.) If the date inserted in t	on the Department	
of filing.) If the date inserted in tument's effective date	on the Department on s, if any. ATURE:	
	"MGR" = Manager MGR (Use attachment if no	(Use attachment if necessary)

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent \$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)