Florida Department of States

Division of Corporations

Element of States

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.

(((H220001906703)))



H220001906703ABC

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

: (850)617-6381

From:

Account Name : FILINGS, INC.
Account Number : 072720000101
Phone : (954)791-2100
Fax Number : (954)583-4117

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

Email	Address:			

FLORIDA LIMITED LIABILITY CO. Silicon Beach Front 2, LLC

Certificate of Status	1
Certified Copy	1
Page Count	03
Estimated Charge	\$160.00

1271.15 31 PM 6: 30

14 15 ED 1022 HAY 31 PM 4: 32

COVER LETTER

	ew Filing Se ivision of Co					
SUBJECT		ach Front 2, LLC				
***************************************		Name of Li	mited Liabi	lity Company		
The enclos	sed Articles of	Organization and fee(s) a	re submitted	d for filing.		
Please retu	en all corresp	ondence concerning this n	natter to the	following:		
	Gregory Mi	tchell, Esquire				
			Name of	[Person	·	_
	Lorium PLI	.c				
			Firm/Co	ompany		-
	197 South F	ederal Highway, Suite 20	0			
		······································	Addı	ress		-
	Boca Raton	FL 33432				
			•	nd Zip Code		-
		ımlaw.com, gmitcheli@le				_
		E-mail address: (to be use		annual report notificati	ion)	
For further i	nformation co	ncerning this matter, pleas	se call:			20
	Gregory Mit	chell, Esquire	561	361-1000		1022 MAY 3
	Nam	·	rea Code	Daytime Telephon	e Number)254 1157 1158
F 1 11						:
Enclosed (s a check for I	he following amount:			 	PH PH
□\$125.00	Filing Fee	☐\$130.00 Filing Fee & Certificate of Status	Certifi	5.00 Filing Fee & led Copy al copy is enclosed)	■\$160.00 Filing Fee Certificate of Status & Certified Copy (additional copy is enclo	<u>3</u> 0
	Mailin	g Address		Street Address		
		iling Section		New Filing Section Di		
		on of Corporations ox 6327		The Centre of Tallaha 2415 N. Monroe Street		
		assee, FL 32314		Tallahassee, FL 3230		

Tallahassee, FL 32303

Silicon Beach Front				
(Must cont	tain the words "Limited L	iability Company,	"L.L.C.," or "LLC.")	
ARTICLE II - Address: The mailing address and street a	ddress of the principal off	fice of the Limited	Liability Company is:	
<u>Princip</u>	nal Office Address:		Mailing Address:	
950 STILLWATER	DRIVE	950	STILLWATER DRIVE	
MIAMI BEACH, FI	33141		AMI BEACH, FL 33141	
	Lorium PLLC			
		Name		
		hway, Suite 200	cceptable)	
	197 South Federal Hig	hway, Suite 200	•	
	197 South Federal Hig Florida street address	thway, Suite 200 (P.O. Box <u>NOT</u> a	cceptable) 33432 Zip	

H22000190670

Title: "AMBR" = Authorized Member "MGR" = Manager	Name and Address:
MGR	RON GUTMAN 950 STILLWATER DRIVE MIAMI BEACH, FL 33141
EV: Effective date, if other than the	ne date of filing: (OPTIONAL)
ective date is listed, the date must of filing.)	be specific and cannot be more than five business days prior to or 9 s not meet the applicable statutory filing requirements, this date will no
EV: Effective date, if other than the cetive date is listed, the date must of filling.) the date inserted in this block does ment's effective date on the Depart EVI: Other provisions, if any.	be specific and cannot be more than five business days prior to or 9 s not meet the applicable statutory filing requirements, this date will not them of State's records.
E V: Effective date, if other than the cetive date is listed, the date must of filling.) The date inserted in this block does ment's effective date on the Depart E VI: Other provisions, if any. REOUIRED SIGNATURE: Signature of This document is I am aware that ar	be specific and cannot be more than five business days prior to or 9 s not meet the applicable statutory filing requirements, this date will no
E V: Effective date, if other than the cetive date is listed, the date must of filling.) The date inserted in this block does ment's effective date on the Department's effective date on the D	s not meet the applicable statutory filing requirements, this date will not timent of State's records. If a member or an authorized representative of a member. executed in accordance with section 605.0203 (1) (b), Florida Statutes, by false information submitted in a document to the Department of State.