

L23000050204

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP

WAIT

MAIL

(Business Entity Name)

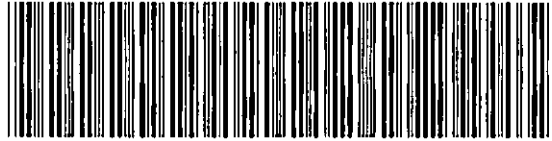
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SECRETARY OF STATE  
TALLAHASSEE, FL

2023 FEB - 1 PM 5:49

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DIRECTOR'S OFFICE  
CORPORATIONS  
TALLAHASSEE, FLORIDA

2023 FEB 1 PM 1:38

RECEIVED

**COVER LETTER**

**TO: Registration Section  
Division of Corporations**

**SUBJECT:** 5457-5459 Ocean Holdings LLC  
Name of Limited Liability Company

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Jay Butler

Name of Person

Asset Protection Services of America

Firm/Company

701 South Carson Street, Suite #200

Address

Carson City, Nevada 89701

City/State and Zip Code

Admin@AssetProtectionServices.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Jay Butler at ( 775 ) 461-5255  
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- \$125.00 Filing Fee     \$130.00 Filing Fee & Certificate of Status     \$155.00 Filing Fee & Certified Copy (additional copy is enclosed)     \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

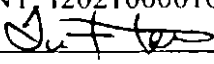
**Mailing Address**

New Filing Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address**

New Filing Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

FLORIDA CAPITAL COURIER SERVICES, INC  
2330 CLARE DRIVE  
TALLAHASSEE, FL 32309  
(850) 524-5437  
(850) 524-6243

PLEASE USE FUNDS FROM THIS ACCOUNT: I20210000160 AMOUNT: \$130.00  
AUTHORIZATION SIGNATURE: 

5457-5459 Ocean Holdings LLC

**Business Name**

**Document Number, (if known):**

Walk in

Pick up time

Mail out

Will wait  Photocopy

**Certified Copy of the Articles of Organization**

**Certificate of Status**

**NEW FILINGS**

Profit

Not for Profit

Limited Liability

Domestication

Other

**CORP**

**PLLC**

**AMMENDMENTS**

Amendment

Resignation of R.A. Officer/Director

Change of Registered Agent

Revocation of Dissolution

Merger

**Conversion**

**Amended and restated Articles**

**Statement of Authority**

**OTHER FILINGS**

Annual Report

Fictitious Name

APOSTIL()

**Country**

**REGISTRATION/QUALIFICATIONS**

Foreign filing

Limited Partnership

Reinstatement

Other

**EXAMINER'S INITIALS:** \_\_\_\_\_

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

5457-5459 Ocean Holdings LLC

(Must end with the words "Limited Liability Company," "L.L.C.," or "LLC.")

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

**Principal Office Address:**

5457-5459 3rd Avenue  
Fort Myers, Florida 33907

**Mailing Address:**

Blue Dolphin Investments LLC  
1908 Thomas Avenue  
Cheyenne, Wyoming 82001

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:

InCorp Services, Inc.  
Name

17888 67th Court North  
Florida street address (P.O. Box **NOT** acceptable)

Loxahatchee                      Florida                      33470  
City                                      State                                      Zip

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TALLAHASSEE, FL

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*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..*

Carlis Fecteau  
Registered Agent's Signature (REQUIRED)

(CONTINUED)

**ARTICLE IV-**

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

**Title:**

"AMB" = Authorized Member

"MGR" = Manager

MGR

**Name and Address:**

Blue Dolphin Investments LLC

1908 Thomas Avenue

Cheyenne, Wyoming 82001

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TALLAHASSEE, FL

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(Use attachment if necessary)

**ARTICLE V:** Effective date, if other than the date of filing: \_\_\_\_\_ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

**ARTICLE VI:** Other provisions, if any.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**REQUIRED SIGNATURE:**

*Jay Butler*

\_\_\_\_\_  
**Signature of a member or an authorized representative of a member.**

This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Jay Butler, Organizer

\_\_\_\_\_  
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)