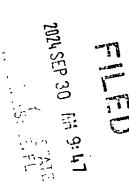
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(Requestor's Name)
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(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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OCEANUS EQ	UITY 10402 LLC	——
Please Debit FC	CA000000003 For: 125	
Thank you Seth	Neeley	
1-1-		
		Art of Inc. File
		LTD Partnership File 25 Foreign Corp. File 27
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		L.C. File
		Fictitious Name File 1/2
		Trade/Service Mark
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		Art. of Amend. File
		RA Resignation
		Dissolution / Withdrawal
		Annual Report / Reinstatement
		Cert. Copy
		Photo Copy
		Certificate of Good Standing
		Certificate of Status
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Signature		Fictitious Owner Search
		Vehicle Search
		Driving Record
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Name	Date Time	UCC 11 Search
		UCC 11 Retrieval
Walk-In	Will Pick Up	Courier

COVER LETTER

	New Filing Sec Division of Cor						
		quity 10402 LLC					
SUBJEC	I:	Name of Lim	ited Liabil	ity Company	· · ·		
The enclo	sed Articles of	Organization and fee(s) are	submitted	for filing.			
Please ret	um all correspo	ondence concerning this ma	tter to the	following:			
	Jeffrey A. Ai	man					
			Name of	Person			
	Aman Law F	irm -					
			Firm/Co	mpany		1020	3
	282 Crystal (Grove Blvd.				S	- 2 7
	-		Addı	ess			၁ ၁
	Lutz, FL 33	548				ion I	
	•		ty/State an	d Zip Code			ò
	jeffa@amanla		S			<u> </u>	
		E-mail address: (to be used		innual report nouncau	on)		
For further	information cor	ncerning this matter, please	call:				
	Jeffrey A. An	nan 81 at (3	265-0004			
	Name		ea Code	Daytime Telephon	e Number		
Enclosed	is a check for th	ne following amount:					
	0 Filing Fee	\$\square\$130.00 Filing Fee & Certificate of Status	Certifi	5.00 Filing Fee & ed Copy al copy is enclosed)	□\$160.00 Fi Certificate of Certified Cop (additional cop	f Status &	
	New Fi Divisio P.O. Bo	g Address iling Section on of Corporations ox 6327 assee, FL 32314		Street Address New Filing Section Di The Centre of Tallaha 2415 N. Monroe Stree Tallahassee, FL 3230	issee et, Suite 810		

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability	Company is:			
Oceanus Equity 1040:				
(Must conta	in the words "Limited I	Liability Company, '	'L.L.C.," or "LLC.")	
ARTICLE II - Address: The mailing address and street ad	dress of the principal o	ffice of the Limited	Liability Company is:	
Principa	l Office Address:		Mailing Addre	<u>255</u> :
16 Elm Place Rye, NY 10580			m Place NY 10580	
ARTICLE III - Registered Age (The Limited Liability Company of another business entity with an ac	cannot serve as its own	Registered Agent. Y		
The name and the Florida street a	ddress of the registered	agent are;		2024 SEP
	Aman Law Firm			ाँग है। प
		Name		<u> </u>
	282 Crystal Grove Bl	lvd		<i>′</i> ∞
	Florida street address	s (P.O. Box NOT ac	ceptable)	1 5 t
	Lutz	Florida	33548	9
	City	State	Zip	9: 47 9: 47

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..

(CONTINUED)

ed Agent's Signature (REQUIRED)

<u>Title:</u>	Name and Address:	
"AMBR" = Authorized Member		
"MGR" = Manager		
MGR	W. Monsees Stubbs, Jr.	
	16 Elm Place Rye, NY 10580	
	KyC, 141 10380	
		3
		2
		}
	· · · · · · · · · · · · · · · · · · ·	5
(Use attachment if necessary)		}
•	CO [™]	
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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)