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.

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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)617-6383

From:

Account Name : SALVATORI & WOOD, BUCKEL, PL

Account Number: I20030000112

: (239)552-4100

Fax Number : (239)649-1706

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.
Email Address: SCS & SWOC (. COM)

Foreign Limited Liability Company Ozean Resort, LLC

Certificate of Status	1
Certified Copy	0
Page Count	01
Estimated Charge	\$130.00

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Corporate Filing Menu

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CR2E027 (9/10)

COVER LETTER

TO:

Registration Section
Division of Corporations

SUBJECT

Ozean Resort, LLC

Name of Limited Liability Company

The enclosed "Application by Poreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida.

Please return all correspondence concerning this matter to the following:

Leo J. Salvatori

Name of Person

Salvatori, Wood, Buckel, Carmichael & Lottes

Pirm/Company

9132 Strada Place, Fourth Floor

Address

Naples, FL 34108

City/State and Zip.Code

scs@swbcl.com

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

For further information concerning this matter, please call:

Leo J. Salvatori

, 239

552-4100

Name of Person

Area Code & Daytime Telephone Number

MAILING ADDRESS:

Division of Corporations Registration Section P.O. Box 6327 Tallahassee, PL 32314

STREET ADDRESS:

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

Enclosed is a check for the following amount:

☐ \$125.00 Piling Fee

\$130.00 Filing Fee & Certificate of Status

☐ \$155.00 Flling Fee & Certified Copy

☐ \$160.00 Filing Fee, Certificate of Status & Certified Copy

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 608,503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. Ozean Resort, LLC (Name of Foreign Limited Liability Company; must include		- 101 1 6 1		
(Name of Foreign Limited Liability Company; must include	"Limited Liability Company," "L,L,C.,"	or "LLC.")	
(If name unavailable, enter alternate name adopted for the purpose consent of the managers or managing members adopting the alternate Company," "L.L.C," "LLC.")				
_{2.} Delaware	26-2804311			
(Jurisdiction under the law of which foreign limited liability company is organized)	(FEI number, if applicable)		
4. January 14, 2008 5.	Perpetual			
(Date of Organization)	(Duration: Year limited liability compa- exist or "perpetual")	ny will cea	ase to	
6		***	~	
(Date first transacted business in Plorie (See sections 608.501 & 608.502 F.S. to	da, if prior to registration.) o determine penalty liability)	(3)	نم	
7. 10 Commerce Drive			NON EIG	-
Destin, FL 32541		<u></u>	+	3 - 200000
(Street Address of	Principal Office)	- f (T	
8. If limited liability company is a manager-managed co	ompany, check here 🔳		9: 02	
9. The name and usual business addresses of the manag	ing members or managers are as fo	llows:	•	
Manager: Ozean Resort Management	Corporation, a Delaware o	orpora	ation	
10 Commerce Drive, Destin, FL 3254	11			
10. Attached is an original certificate of existence, no more than 90 dathe jurisdiction under the law of which it is organized. (A photocopy translation of the certificate under oath of the translator must be submit	is not acceptable. If the certificate is in a fo			cords in
11. Nature of business or purposes to be conducted or p	promoted in Florida: Real Estate	Develop	ment	
Signature of a member or an auth (In accordance with section 608,408(3), F.S., the execution	orized representative of a member, ion of this document constitutes an effirmation			
penalties of perjury that the facts stated herein are true, document to the Department of State constitutes a	I am aware that any false information sub	mitted in a		
l en .l. Salvatori Eso. Author	· · · · · · · · · · · · · · · · · · ·	reson to	٠.,	•

Typed or printed name of signee

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF PLORIDA.

If unavailable	e, the alternate to be used in the state of Florida is:	
2. The name	and the Florida street address of the registered agent and office are:	7. 2
	Salvatori, Wood, Buckel, Carmichael & Lottes	2013 MOV
·	(Name)	<u> </u>
	9132 Strada Plaza, Fourth Floor	
	9132 Strada Plaza, Fourth Floor Florida Street Address (P.O. Box NOT ACCEPTABLE)	S W +

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 608, Florida Statutes.

(\$ignature)

\$ 100.00 Filing Fee for Application
\$ 25.00 Designation of Registered Agent
\$ 30.00 Certified Copy (optional)
\$ 5.00 Certificate of Status (optional)

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Delaware

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "OZEAN RESORT, LLC" IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE SEVENTH DAY OF NOVEMBER, A.D. 2013.

4489218 8300

131278865

You may varify this certificate online at corp. delaware, gov/authver, shtml

AUTHENTY CATION: 0875853

DATE: 11-07-13

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