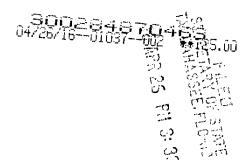
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(Re	equestor's Name)	
(Ac	ldress)	
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PICK-UP	☐ WAIT	MAIL
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Certified Copies	Certificates	of Status
	_	
Special Instructions to	Filing Officer:	
<u> </u>		





300284870463



APR 2 7 2016 S. YOUNG



Charles R. Gryll cgryll@gryll.com

Brian D. Gryll

April 25, 2016

[OVERNIGHT DELIVERY]

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

Re: Ocean Drive Food Court, LLC

Dear Sir/Madam,

Enclosed, please find: Cover Letter, Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida, Articles of Organization, Certificate of Limited Liability Company Charter and a check in the amount of \$125.00 for the costs and fees involved in this matter.

Please process this at your earliest convenience and please forward copies of its acceptance to the undersigned. I thank you in advance for your attention to this matter.

Sincerely,

Brian D. Gryll

BDG/rm

COVER LETTER

TO:

TO:		ion Section of Corporation	s				
SUBJI		n Drive Food Co	ourt, LLC				
			Name of I	Limited Liability (Company		•
			eign Limited Liability Comp I to register the above refere				
Please	return all co	rrespondence co	oncerning this matter to the	following:			
	I	Brian D. Gryll					
	_		Na	ame of Person		· · · · · · · · · · · · · · · · · · ·	
	(Gryll Law					16 BR 26
	Firm/Company						
	6	703 N. Cicero	Ave.				-17
				Address			
	I	Lincolnwood, IL	. 60712				<i>ය</i> ්
			City/St	ate and Zip Code			
	bri	an@gryll.com					
			E-mail address: (to be used	for future annual	report not	ification)	<u> </u>
For fur	ther informa	tion concerning	this matter, please call:				
	Brian D. (Gryll		847 at (673-83	83	
	ATTACK	Name of	Contact Person	Area Code	Day	rtime Telephone Number	-
	Division of Registration P.O. Box	G ADDRESS: of Corporations on Section 6327 ee, FL 32314			Division Registrate Clifton B 2661 Exe	of Corporations ion Section uilding ceutive Center Circle see, FL 32301	
Enclose		for the followi Filing Fee	ng amount: ☐ \$130.00 Filing Fee & Certificate of Status	□ \$155.00 Filir Certified Copy	ng Fee &	☐ \$160.00 Filing Fee, O	

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

IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

	32.123 1, 1, 1, 2 3 3 3 1 20.112			
1. Ocean Drive Food Cou	rt, LLC			
	eign Limited Liability Company; m	nust include "Limited Lia	ability Company," "L.L.C.," or "LLC.	")
OD Food Court, LLC				
Liability Company," "L.L.C,		, , ,	ss in Florida. The alternate name mus	: include "Limited
Nevada		3. 81-2355483		53.00
(Jurisdiction under the law company is organized)	of which foreign limited liability		(FEI number, if applicable)	5 73
1.	(Date first transacted busi	iness in Florida, if prior t	o registration.)	23
	(See sections 605.0904 & 60	35.0905, F.S. to determin	ne penalty liability)	72 115
8350 W. Sahara Ave.	4 4 4	- And Annah of Subsection Control of Subsect		PH 3: 33
	(Street Address o	of Principal Office)		3 5
5. Suitr #150	(======================================			
Las Vegas, NV 89117				
	(Mailin _i	g Address)		
7. Name and street address	ss of Florida registered agent: ((P.O. Box NOT accep	table)	
Name:	Charissa Davidovici		_	
Office Address:	1395 Daytonia Road		_	
	Miami Beach		, Florida	
Registered agent's accep	(City)		(Zip code)	
designated in this applica to complywith the provisi	tion, I hereby accept the appoi	intment as registered one proper and complete	he above stated limited liability co agent and agree to act in this cap e performance of my duties, and	acity. I further agr
	(Regi	istered agent's signature))	
8. The name, title or capa Charissa Davidovici	acity and address of the person((s) who has/have autho	rity to manage is/are:	
1395 Daytonia Road		7.7.7.4.4.4.4.4.4.4.4.4.4.4.4.4.4.4.4.4		
Miami Beach, FL 33141				
D. Attached is a certificate urisdiction under the law of the translator must be so	of which it is organized. (If the	days old, duly authenti	cated by the official having custodign language, a translation of the c	ly of records in the ertificate under oat
	Signatu	are of an authorized person	on .	
	d in accordance with section 605	5.0203 (1) (b), Florida	Statutes. I am aware that any false lony as provided for in s.817.155,	
manned in a document to	Charissa Davido	_	ion, as provided for in 5.017.133,	i ende
	- MILIZZO DUVIGOI	gic t		

Typed or printed name of signee





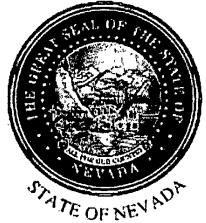
BARBARA K. CEGAVSKE Secretary of State 202 North Carson Street Carson City, Nevada 89701-4201 (775) 684-5708 Website: www.nvaos.gov

Articles of Organization Limited-Liability Company (PURSUANT TO NRS CHAPTER 86)

Filed in the office of	Document Number
Ballow K. Capade	20160181408-91
Barbara K. Cegavske	Filing Date and Time
Secretary of State	04/22/2016 11:57 AM
	E0183952016-5

USE BLACK INK ONLY - DO	NOT HIGHLIGHT	ABOVE SPACE IS FOR OFFICE USE ONLY			
1. Name of Limited- Liability Company: (must contain approved limited-liability company wording; see instructions)	OCEAN DRIVE FOOD COURT LLC	Check box if a Check box if a Series Limited- Liability Company Liability Company			
2. Registered Agent for Service	Commercial Registered Agent:				
of Process: (check only one box)		or Position with Entity and address below)			
	PANCY COFEMAN CPA				
Name of Noncommercial Registered Agent OR Name of Title of Office or Other Position with Entity					
	8350 WEST SAHARA AVENUE, SUITE 150 LAS VEGAS Street Address City	Nevada 89117			
	Street Address City	Zıp Code			
	8350 WEST SAHARA AVENUE, SUITE 150 LAS VEGAS	Nevada 89117			
	Mailing Address (if different from street address) City	Zip Code			
3. Dissolution Date: (optional)	Latest date upon which the company is to dissolve (if existence is not perpetual):				
4. Management: (required)	Company shall be managed by: Manager(s) OR (check only one box)	Member(s)			
5. Name and Address of each	1) CHARISSA DAVIDOVICI Name				
Manager or	8350 WEST SAHARA AVENUE, SUITE 150 LAS VEGAS	NV 89117			
Managing Member: (attach additional page it	Street Address City	State Zip Code			
more than 3)					
	Name				
	Chant Address	State Zip Code			
	Street Address City	State Zip Good			
	Nome				
ļ :	Name				
	Street Address City	State Zip Code			
6. Effective Date	, , , , , , , , , , , , , , , , , , , ,				
and Time: (optional)	Effective Date: Effective Time:				
7. Name, Address	I declare, to the best of my knowledge under penalty of perjury, that the information co that pursuant to NRS 239.330, it is a category C felony to knowingly offer any false or fo	ntained herein is correct and acknowledge project instrument for filling in the Office of			
and Signature of	the Secretary of State.				
Organizer: (attach	BRIAN GRYLL BRIAN GRYLL				
additional page if more than 1 organizer)	Name Organizer Signature				
	6703 N. CICERO AVE. LINCOLNWOOD				
8. Certificate of	Address City Liberably accept appointment as Registered Agent for the shake a				
Acceptance of	I hereby accept appointment as Registered Agent for the above named Entity.				
Appointment of	X PANCY COFFMAN, CPA	:4/22/2016			
Registered Agent:	Authorized Signature of Registered Agent or On Behalf of Registered Agent	Entity Date			

SECRETARY OF STATE





LIMITED LIABILITY COMPANY CHARTER

I, BARBARA K. CEGAVSKE, the Nevada Secretary of State, do hereby certify that OCEAN DRIVE FOOD COURT LLC did on April 22, 2016, file in this office the Articles of Organization for a Limited Liability Company, that said Articles of Organization are now on file and of record in the office of the Nevada Secretary of State, and further, that said Articles contain all the provisions required by the laws governing Limited Liability Companies in the State of Nevada.



Certified By: Electronic Filing Certificate Number: C20160422-1109 You may verify this certificate online at http://www.nvsos.gov/ IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office on April 22, 2016.

BARBARA K. CEGAVSKE Secretary of State