

6/3/2016

Division of Corporations

Florida Department of State
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To:

Division of Corporations
Fax Number : (850)617-6383

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

Email Address: RICARDO.tabet@me.com

**Foreign Limited Liability Company
620 OCEAN DRIVE, LLC**

Certificate of Status	1
Certified Copy	1
Page Count	02
Estimated Charge	\$160.00

2016 JUN -3 PM 12:34
TALLAHASSEE, 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:

(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")

7 APPLIED FOR

(FBI number, if applicable)

(Date first transacted business in Florida, if prior to registration.)
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

MIAMI BEACH, FLORIDA 33139

(Street Address of Principal Office)

MIAMI BEACH, FLORIDA 33139

(Mailing Address)

Name: **BECHARA KABOUTH**

Office Address: 1665 ALTON ROAD, UNIT #3

MIAMI BEACH

Florida 33139
(Zip code)

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 application, 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 relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

(Registered agent's signature)

BECHARA KABOUTH, MANAGER, 1665 ALTON ROAD, UNIT #3, MIAMI BEACH, FLORIDA 33139

9. Attached is a certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted)


Signature of an authorized person

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.

BECHARA KABOUTH, MANAGER

Typed or printed name of signee

Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "620 OCEAN DRIVE, 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 FIFTEENTH DAY OF APRIL, A.D. 2016.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "620 OCEAN DRIVE, LLC" WAS FORMED ON THE FOURTEENTH DAY OF APRIL, A.D. 2016.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL FRANCHISE TAXES HAVE BEEN ASSESSED TO DATE.



6016450 8300

SR# 20162314053

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

A handwritten signature of Jeffrey W. Bullock in black ink, written over a horizontal line.

Jeffrey W. Bullock, Secretary of State

Authentication: 202153272

Date: 04-15-16