114000195576

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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COVER LETTER

Division of C	Section Corporations		
SUBJECT: N2 Ente	erprises LLC. Name of Lin	nited Liability Company	
The enclosed Articles	of Organization and fee(s) ar	re submitted for filing.	
Please return all corre	spondence concerning this m	atter to the following:	
<u>Dung Ta</u>	n Tu	Name of Person	
N2 Enter	prises LLC.	Firm/Company	
<u>3903 We</u>	st Tacon Street	Address	·····
<u>Tampa, F</u>	Florida 33629 C	ity/State and Zip Code	······
Preston.Distribu	tion@gmail.com E-mail address: (to be used	d for future annual report notifica	ation)
For further informatio	n concerning this matter, plea	ase call:	
Dung Tan Tu Nan	at (§	313) <u>263-6016</u> Area Code Daytime Te	lephone Number
Enclosed is a check for	or the following amount:		
□ \$125.00 Filing Fee	2\$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
Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street/Courier Address Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE Division of Corporations

December 15, 2014

DUNG TAN TU 3903 WEST TACON STREET TAMPA, FL 33629

SUBJECT: N2 ENTERPRISES LLC.

Ref. Number: W14000074415

We have received your document for N2 ENTERPRISES LLC. and your check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You must list the corporation's principal street address and/or a mailing address in the document. A post office box is not acceptable for the principal address.

If your business entity does not intend to transact business until January 1st of the upcoming calendar year, you may wish to revise your document to include an effective date of January 1st. If you do not list an effective date of January 1st, your business entity will become effective this calendar year and it will be required to file an annual report and pay the required annual report fee for the upcoming calendar year this coming January, which is merely weeks away. By listing an effective date of January 1st, the entity's existence will not begin until January 1st of the upcoming year and will, therefore, postpone the entity's requirement to file an annual report and pay the required annual report filing fee until the following calendar year.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Neysa Culligan Regulatory Specialist II

Letter Number: 514A00026412

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:		
N2 Enterprises LLC. (Must end with the words "Limite"	ed 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:	Mailing Address:	
3903 W TACON ST. TAMPA. FL 33629	3903 West Tacon Street Tampa, Florida 33629	
ARTICLE III - Registered Agent, Registered Office (The Limited Liability Company cannot serve as its ow another business entity with an active Florida registration.) The name and the Florida street address of the registered	n Registered Agent. You must designate an in ion.)	idividual or
Diem-Trang Le Tu		福品市
Nam	1e	2 F
3903 West Tacon Street		浴で面
Florida street address (P.O. Bo	ox NOT acceptable)	E FILOR
Tampa	FL 33629	STA IS
City	Zip	5 5
Having been named as registered agent and to accept so the place designated in this certificate, I hereby acceptance capacity. I further agree to comply with the provision of my duties, and I am familiar with and accept the of the Characteristics. Registered Agent's Sign	ept the appointment as registered agent and aging the statutes relating to the proper and compobligations of my position as registered agent as apter 605, F.S	ree to act in this plete performance

(CONTINUED)

Page 1 of 2

Title:	Name and Address:
"AMBR" = Authorized Member	<u> </u>
"MGR" = Manager	
President (AMBR)	Diem-Trang Le Tu
	3903 West Tacon Street
	Tampa, Florida 33629
Vice-President (AMB	Dung Tan Tu
	3903 West Tacon Street
	Tampa, Florida 33629
Treasurer	Dung Tan Tu
	3903 West Tacon Street
	Tampa, Florida 33629
Secretary	Dung Tan Tu
	3903 West Tacon Street
	Tampa, Florida 33629
ective date is listed, the date must be	late of filing: JAMAM 2015. (OPTIONAL) specific and cannot be more than five business days prior to or 90 days
EV: Effective date, if other than the d	
EV: Effective date, if other than the dective date is listed, the date must be of filing.)	
E V: Effective date, if other than the dective date is listed, the date must be of filing.) E VI: Other provisions, if any. REQUIRED SIGNATURE:	Specific and cannot be more than five business days prior to or 90 days
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E V: Effective date, if other than the dective date is listed, the date must be of filing.) E VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a (In accordance with section)	member or in authorized representative of a member. 605.0203 (1) (b), Florida Statutes, the execution of this document?
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