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SECRETARY OF STAIL
DIVISION OF CORPORATION:

2 10/06/15

## **COVER LETTER**

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	legistration Section Division of Corporations	
SUBJECT	NYC Expert Services LLC.	
Sebabe		me of Limited Liability Company
The enclos	sed Articles of Organization and	fee(s) are submitted for filing.
Please reti	urn all correspondence concernir	ng this matter to the following:
	Leonard M Wasnock	
	*	Name of Person
	NYC Expert Services LLC.	
		Firm/Company
	1011 N. Pine St.	
		Address
	Deland/FL 32724	
	lmw73053@gmail.com	City/State and Zip Code
	E-mail address: (to	be used for future annual report notification)
For further i	nformation concerning this matt	er, please call:
	Leonard M Wasnock	727 741-7256 at ( )
	Name of Person	Area Code Daytime Telephone Number
Enclosed is	s a check for the following amou	ınt:
\$125.00 F	iling Fee \$130.00 Filing Certificate of S	Fee & tatus
	Mailing Address New Filing Section	Street Address Now Eiling Section

New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 New Filing Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:				
The name of the Limited Liabilit	y Company is:			
NYC Expert Service	s LLC.			
(Must end	with the words "Limite	ed Liability Company	/, "L.L.C.," or "LLC.")	
ARTICLE II - Address:				
The mailing address and street a	ddress of the principal	office of the Limited	Liability Company is:	
-			•	
Principal Office Address:			Mailing Address:	
1011 N. Pine St.		101	1011 N. Pine St.	
Deland FL		Dela	Deland FL	
32724	·	327	24	
ARTICLE III - Registered Age (The Limited Liability Company another business entity with an a The name and the Florida street	cannot serve as its own active Florida registrat	n Registered Agent. ion.)	nt's Signature: You must designate an individual or	
•	Leonard M Wasnoo	ck		
Name				
1011 N. Pine St.				
Florida street address (P.O. Box NOT acceptable)				
	Deland	· FL	32724	
	City	State	Zip	

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..

Registered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

_	itle: AMBR" = Authorized Member	Leonard M Wasnock 1011 N. Pine St. Deland FL 32724		
"MGR" = Manager MGR  MGR	"MGR" = Manager MGR			
		Nitin Kumar Singh SC- 256, 1st Floor, Shastri Nagar, Ghaziabad, Uttar Pradesh, 201001, India		
_				
J)	Jse attachment if necessary)			
(If an effect the date of Note: If the	tive date is listed, the date must be specific filing.)	ling: (OPTIONAL)  and cannot be more than five business days prior to or 90 days after the applicable statutory filing requirements, this date will not be listed at ate's records.		
ARTICLE	VI: Other provisions, if any.			
R	EOUIRED SIGNATURE:	and M Wasner &		
	This document is executed in I am aware that any false info	r or an authorized representative of a member. accordance with section 605.0203 (1) (b), Florida Statutes, rmation submitted in a document to the Department of State ny as provided for in s.817.155, F.S.		

The name and address of each person authorized to manage and control the Limited Liability Company:

ARTICLE IV-

Page 2 of 2

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent \$30.00 Certified Copy (Optional)

Filing Fees:

Typed or printed name of signee

Leonard M Wasnock

\$ 5.00 Certificate of Status (Optional)