L03000044909

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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NPB DEVELOPMENT, LLC

8217 Steeplechase Drive
Palm Beach Gardens, FL 33418
561 691-9050 telephone 561 622-1851 facsimile

November 6, 2003

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

Re: NPB Development, LLC

Dear Sir/Madam:

Enclosed please find the original and one photocopy of the of the Articles of Organization and Designation of Registered Agent for the limited liability company we wish to form in the name **NPB Development, LLC.** Please file these documents at your earliest convenience, then return a certified copy and Certificate of Status to me as soon as possible. Our check in the amount of $160.00 is enclosed for the filing fees.

Thank you very much for your help in helping us form this new limited liability company.

Sincerely,

M Jeanne Mundie

M. Jeanne Mundie

/mjm
Enclosures

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ARTICLES OF ORGANIZATION
FOR
FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:
The name of the Limited Liability Company is:

NPB Development, 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:**
8217 Steeplechase Drive	same
Palm Beach Gardens, FL 33418	

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:
The name and the Florida street address of the registered agent are:

Gene Galui
Name

8217 Steeplechase Drive
Florida street address (P.O. Box **NOT** acceptable)

Palm Beach Gardens FLORIDA 33418
City, State, and 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 608, Florida Statutes..

Registered Agent's Signature

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ARTICLE IV- Manager(s) or Managing Member(s):
The name and address of each Manager or Managing Member is as follows:

Title:	**Name and Address:**
"MGR" = Manager "MGRM" = Managing Member	
MGR	Gene Galui 8217 Steeplechase Drive Palm Beach Gardens, FL 33418

(Use attachment if necessary)

NOTE: An additional article must be added if an effective date is requested.

REQUIRED SIGNATURE:

Signature of a member or an authorized representative of a member.

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

Gene Galui
Typed or printed name of signee

Filing Fees:
$100.00 Filing Fee for Articles of Organization
$ 25.00 Designation of Registered Agent
$ 30.00 Certified Copy (Optional)
$ 5.00 Certificate of Status (Optional)

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