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Florida Department of State Division of Corporations Public Access System

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To:

Division of Corporations

Fax Number

: (850)205-0383

From:

Account Name

: EMPIRE CORPORATE KIT COMPANY

Account Number: 072450003255

: (305)634-3694

Phone Fax Number

: (305)633-9696

FLORIDA/FOREIGN LIMITED LIABILITY CO.

nbd imports, llc

JIYISION OF CORPORATION

Certificate of Status	0	
Certified Copy	0	
Page Count	03	
Estimated Charge	\$125.00	

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175-24-200E 14:07

ARTICLE I - Name: The name of the Limited Liability Company is:	NBD Imports, LLC
Article II - Address: The mailing address and street address of the pri	inciple office of the Limited Liability Company is:
Principal Office Address;	Mailing Address:
170-70 COLLINS AVE Suite 258	SAME
Miami FL 33160	
ARTICLE III - Registered Agent, Registered O	office, & Registered Agent's Signature:
The name and the Florida street address of the re	gistered agent are;
John C Nam 170-70 Co Florida street address (P.C Higwi FL 3 City, State,	LLINS AVE Suite 2.58 2 = 5.800 NOT socieptable) 33160
Having been named as registered agent and to distinct the place designated ment as registered agent and agree to act in the provisions of all statutes relating to the proper and familiar with and accept the obligations of my page 1. Chapter 60 Registered Agent	in this certificate, I hereby accept the appoint- is capacity. I further agree to comply with the d complete performance of my duties, and I am osition as registered agent as provided for in OS., F.S
	HO6000079027

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TOTAL P.83

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

<u> Mer.</u> TMGR" = Manager TMGRM" = Managing Member	Name and Address:
MGR	John Guarin 170-70 Callius AVE Suste 259 Miami Fl 33160
(Use attachment if necessary)	

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

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 panalities of parjury that the facts stated iterain are true.)

JOHN GUARIN

Typed or printed name of signee

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REQUIRED SIGNATURE: