

L01000015998

Division of Corporations

9/13/01 10:57 AM

Florida Department of State

Division of Corporations
Public Access System
Katherine Harris, Secretary of State

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H01000100597 3)))

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:
Division of Corporations
Fax Number : (850) 205-0383

From:
Account Name : A. BERNARD BOOKKEEPING & TAX SERVICE, INC.
Account Number : 071162000147
Phone : (305) 251-4591
Fax Number : (305) 251-1975

FILED
01 SEP 18 PM 12:39
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

LIMITED LIABILITY COMPANY

~~NU-D CORP, LLC~~

NU Dimensions, LLC

Name Availability	
Document Examiner	DCC
Updater	DCC
Updater Verifier	DCC
Acknowledgment	DCC
W. P. Verifier	DCC

Certificate of Status	0
Certified Copy	1
Page Count	024
Estimated Charge	\$155.00

RECEIVED
01 SEP 19 AM 7:30
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Electronic Filing Menu

Corporate Filing

Public Access Help

L01000015998



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State

September 18, 2001

A. BERNARD BOOKKEEPING & TAX SERVICE, INC.

SUBJECT: NU D CORP, LLC
REF: W01000021631

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

Because the term "CORP" refers to a corporation, it cannot be part of the name of your limited liability company.

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) 245-6958.

Lee Rivers
Document Specialist

FAX Aud. #: H01000100597
Letter Number: 301A00052229

FROM : ---

PHONE NO. : 786 2429091

SEP. 18 2001 03:13PM P1

H010001005973

**ARTICLES OF ORGANIZATION
FOR
FLORIDA LIMITED LIABILITY COMPANY**

ARTICLE I - NAME

The name of the Limited Liability Company is NU DIMENSIONS, LLC.

ARTICLE II - ADDRESS

The mailing address and street address of the principal office of the Limited Liability Company is

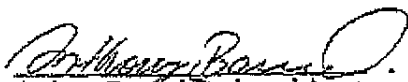
13395 SW 131 STREET
MIAMI, FLORIDA 33186

ARTICLE III - REGISTERED AGENT, REGISTERED OFFICE & REGISTERED AGENT'S SIGNATURE

The name and the Florida street address of the registered agent are:

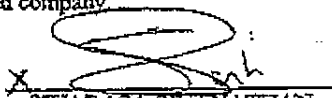
Name: Anthony Bernard
Address: 9032 Sw 152nd Street
City/State/Zip: Miami, Florida 33157

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 appointments 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, F.S.


Anthony Bernard-Registered Agent

ARTICLE IV - MANAGEMENT

☐ The limited liability Company is to be managed by one manager or more managers and is, therefore, a manager-managed company.


SIVARASA SIVANATHAN

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.


SIVARASA SIVANATHAN

FILED
01 SEP 18 PM 12:39
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

H010001005973

4010001005973

**CERTIFICATE OF DESIGNATION
OF
REGISTERED AGENT/REGISTERED OFFICE**

Pursuant to the provision of Section 608.415 or 608.507, Florida Statutes, the undersigned Limited Liability Company submits the following statement to designate a registered office and registered agent in the State of Florida.

1. The name of the Limited Liability Company is: NU DIMENSIONS, LLC.
2. The name and the Florida Street address of the registered agent and office are:

Anthony Bernard
9032 Sw 152nd Street
Miami, Florida 33157

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 appointments 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 obligation of my position as registered agent as provided for in Chapter 608, F.S.


Anthony Bernard - Registered Agent

FILED
01 SEP 18 PM 12:39
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

4010001005973