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Account Name : BUSINESS FILINGS
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LIMITED LIABILITY COMPANY

NFI ENTERPRISES LLC

Certificate of Status	1
Certified Copy	0
Page Count	03
Estimated Charge	\$130.00

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**ARTICLES OF ORGANIZATION
OF
NFI ENTERPRISES LLC**

ARTICLE I NAME

The name of the limited liability company shall be: **NFI ENTERPRISES LLC**

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this Limited Liability Company shall be: 7626 Pimmit Hills Dr., Jacksonville, Florida 32244.

ARTICLE III INITIAL REGISTERED AGENT & STREET ADDRESS

The name and address of the initial registered agent is: Michael Kay, 7626 Pimmit Hills Dr., Jacksonville, Florida 32244. Located in the County of Duval.

ARTICLE IV DURATION

The duration for the limited liability company shall be: 12/31/2041.

ARTICLE V MANAGERS

The management of the limited liability company is reserved for the Members and the names and addresses of the members of the Limited Liability Company are:

Michael Kay, 7626 Pimmit Hills Dr, Jacksonville, Florida 32244
Paul Kearse, 7626 Pimmit Hills Dr, Jacksonville, Florida 32244
Bryan Hastings, Route 101, Dublin, New Hampshire 03444



Richard Oster, Vice President, Business Filings Incorporated.

Prepared by Richard Oster, Business Filings Incorporated, 8025 Excelsior Dr., Suite 200,
Madison, WI 53717.
(608) 827-5300.

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TALLAHASSEE, FLORIDA

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CERTIFICATE OF DESIGNATION OF REGISTERED
AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415, FLORIDA STATUTES,
THE UNDERSIGNED CORPORATION, ORGANIZED UNDER THE LAWS OF THE
STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN
DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE
STATE OF FLORIDA.

The name of the limited liability company is: **NFI ENTERPRISES LLC**

The name and address of the registered agent and office is Michael Kay, 7626 Pimmit
Hills Dr., Jacksonville, Florida 32244. Located in the County of Duval.

Having been named as registered agent and to accept service of process for the above
stated corporation 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.

Signature:


Michael Kay

Date: November 23, 2001

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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