L020000 11470 R. Norton 3222C Meridian Way No. Palm Beach Gardens, Fl. 33410 City/State/Zip Phone # Office Use Only CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known): (Corporation Name) (Document #) 800005493378--05/09/02--01011--001 (Corporation Name) (Document #) ****150.00 ****160.00 (Corporation Name) (Document #) (Corporation Name) (Document #) Walk in Certified Copy Pick up time ☐ Photocopy ☐ Mail out Will wait Certificate of Status **NEW FILINGS** AMENDMENTS ■ Profit ■ Amendment Not for Profit Resignation of R.A., Officer/Director Limited Liability Change of Registered Agent Domestication Dissolution/Withdrawal

Merger

Foreign

Limited Partnership Reinstatement Trademark Other

REGISTRATION/QUALIFICATION

Examiner's Initials

CR2E031(7/97)

Other

OTHER FILINGS

Annual Report

☐ Fictitious Name

3/3/8

- ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

NORCARD CONSTRUCTION MANAGEMENT, LLC

ARTICLE I - Name:

ARTICLE II - Address:

The name of the Limited Liability Company is:

The mailing addr	ess and street address of the p	principal office of the Limited Lia	bility Company is:
3222C	MERIDIAN WAY	NO., PALM BEACH	GARDENS, FL. 33410
ARTICLE III -	Registered Agent, Registere	ed Office, & Registered Agent's	Signature:
The name and the	E Florida street address of the RICHARD 3222 C M Florida street address PALM BEACH G Cit	Name ELIDIAN WAY NO ess (P.O. Box NOT acceptable) ALDENS FL 33410 y, State, and Zip	OZ MAY -8 AM 8: 34 SECRETARY OF STATE TALLAHASSEE, FLORIDI
liability compan registered agent statutes relating	y at the place designated in the and agree to act in this capace to the proper and complete pations of my position as registed.	o accept service of process for the ais certificate, I hereby accept the accity. I further agree to comply with erformance of my duties, and I ambiered agent as provided for in Chaesistered Agent's Signature	appointment as h the provisions of all 1 familiar with and
The Limite	anagement (Check box if a set Liability Company is to be a manager - managed company	managed by one manager or mor	re managers and is,
	1 the	ne added if an effective date is rec	· · · · · · · · · · · · · · · · · · ·
	(In accordance with section	608.408(3), Florida Statutes, the execut	tion

Filing Fees:

that the facts stated herein are true.)

of this document constitutes an affirmation under the penalties of perjury

Typed or printed name of signee

\$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)