		,		110011						
С	ED LIAE OMPAN ISTATEM	Y		Secretar	TMENT OF STATE y of State orporations	TE	į			
DOCUMENT # L02000013664 1. Umited Liability Company's Name								-		
NANGOO LLC										
2. Principa	al Office Addr	ess	3. Mailing C	ling Office Address						
· ·				2866 NE 30TH STREET			4. State/Country of Formation			
Suite, Apt. #		JII DIREBI		Suite, Apt. #, etc.			2000112		•	
Cuito, Apt. II	7, 616.		June, real m	raite, ripe w, etc.			5. Date Organized or Qualified			
City & State		_	City & State				To Do Business in Florida			
			l i				6. FEI Number Applied For			
Zip Country			Zip	Zip Country			32-0018754 Not Applicable			
3330	6 †	Country	33306		Joanna	7. CERTI	FICATE OF STAT	TUS DESIRED (\$5,00 /	Additional Fee required Certificate of Status	
	} 	<u>'-</u>	8.	Name and A	Address of Current Re	gistered Agent	~~~			
	Tame					 	<u> 11 11 1</u> 27/20/05	<u>055581</u> 01038008	**50.00	
	DOA	NE, JAMES	F	,	311 501 00	01000 000	1.00			
	Street Address (P.O. Box Number is Not Acceptable) 900055581859									
	2866 NE 30TH STREET							91050 802	*** 260 60	
	Suite, Apt. #, Etc.									
	City						State	Zip Code		
		AUDERDALE					FL	_33306_		
9. I, being appointed the registered agent of the above named limited liability company, am familiar with and accept the obligations of Chapter 608, F.S.										
Signature of Registered Agent formula F. Down Date May 23, 2005 REGISTERED AGENT MUST SIGN									2005	
10. Name	es and Street	Addresses of Managing	Members/Manager	·						
Tides	Name of Managers			Street Address of Each Managing Member/Manager				City / State / Zip		
MGR	: James F. Donne			2866 n. l. 30 st. 1821			\mathcal{H}_{o}	H. Landerdole, 30. 33306		
MCO	Many L Moans		ml /	2866 N.L. 30 3t. 8		比 1	1 H. Landerdde, Fl. 33301		32306	
# 10 kg	7-401	Jan Sala	<i></i>	0000	11.5. HO R.	<u> V 01</u>	0,		39,50+	
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·	<u> </u>		<u> </u>	 	2/ <u>(a)</u>	iing ii	2 in Milawain 07			
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filing to all fee	his reinstaten	nent application the reas a limited liability compan	on for dissolution has	been elimin	nated, the limited liability	company name :	satisfies the req	chapter 608, F.S. I furthe purements of section 608 my signature shall have the	1.406, F.S., and that	
Signature of Managing M	of Member/Man	ager <u>fan</u>	res 7. G	Drane	Date S	5/23/05	Daytime F	Phone# 954-50	65-4841	
Typed or pr	rinted name o	of signing Managing Me	mber/Manager							