

L030000 36605

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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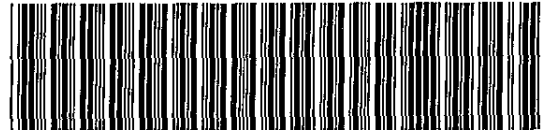
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA
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DIVISION OF CORPORATION

BN



CORPORATION SERVICE COMPANY"

ACCOUNT NO. : 072100000032

REFERENCE : 256021 8997A

AUTHORIZATION : *Patricia Pizito*

COST LIMIT : \$ 155.00

ORDER DATE : September 25, 2003

ORDER TIME : 10:06 AM

ORDER NO. : 256021-005

CUSTOMER NO: 8997A

CUSTOMER: J. Jeffrey Thistle, Esq
Devitt Thistle & Devitt

30 S. E. 4th Avenue

Delray Beach, FL 33483

DOMESTIC FILING

NAME: NIKKI ENTERPRISES, LLC

EFFECTIVE DATE:

____ ARTICLES OF INCORPORATION
____ CERTIFICATE OF LIMITED PARTNERSHIP
XX ARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX CERTIFIED COPY
____ PLAIN STAMPED COPY
____ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Darlene Ward - EXT. 1135

EXAMINER'S INITIALS: _____

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FLORIDA

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

**ARTICLE I
NAME:**

The name of the Limited Liability Company is:

NIKKI ENTERPRISES, LLC

**ARTICLE II
ADDRESS:**

The mailing address and street address of the principal office of the Limited Liability Company is: Twelve Ocean Harbour Circle, Ocean Ridge, Florida 33435, and the mailing address is the same.

**ARTICLE III
DURATION:**

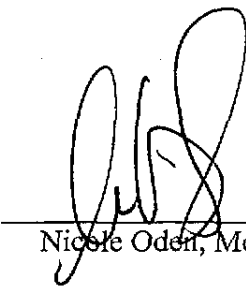
The period of duration for the Limited Liability Company shall be perpetual.

**ARTICLE IV
Management:**

The Limited Liability Company is to be managed by a manager and the name and address of the manager is:

Nicole Oden
Twelve Ocean Harbour Circle
Ocean Ridge, Florida 33435

Executed this 24 day of Sept, 2003.



Nicole Oden, Member

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TALLAHASSEE, FLORIDA

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

PURSUANT TO THE PROVISIONS OF SECTION 608.415 OR 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY, 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.

1. The name of the limited liability company is: NIKKI ENTERPRISES, LLC
2. The name and address of the registered agent and office is:

Nicole Oden
Twelve Ocean Harbour Circle
Ocean Ridge, Florida 33435

and the mailing address is the same.

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 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 am familiar with and accept the obligations of my position as registered agent.



Nicole Oden

Sept 24, 2003
Date