## 103000045218

(Requestor's Name)
(Requestor's Name)  2422 PAYSOL15 AVE  (Address)
Malbourne, FZ 32901
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
!
Special Instructions to Filing Officer:
11/12 FLC
IMA PLU
1
EFFECTIVE 1/104
Office Use Only



500024483685

11/12/03--01028--008 \*\*125.00

HLM

FILED
03 NOV 12 PN 5: 37

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

**EFFECTIVE DATE: 01-01-04** 

ARTICLE I – The Name of the Limited Liability Company is: LEONARD NILE, LLC

ARTICLE II – PRINCIPAL PLACE OF BUSINESS AND MAILING ADDRESS 450 GEMAIRE DRIVE #101 MELBOURNE, FL. 32904

ARTICLE III - Registered Agent, Registered Office & Registered Agent's Signature;

The name and Florida street address of the registered agent is: FRANK BRUNN **407 EAST NEW HAVEN AVENUE** MELBOURNE, FL. 32901-4507

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 I am familiar with and accept the obligations of my position as registered agent as provided for in chapter 608, F.S.

Registered Agent's Signature

ARTICLE IV - LIMITED LIABILITY PURPOSE IS ANY LAWFUL PURPOSE

Signature of a member or an authorized representative of a member.

ARTICLE V – MANAGING MEMBERS NAME AND ADDRESS LEONARD NILE	LUAH AS	NOV 12	T
450 GEMAIRE DRIVE #101	2	10	· •
MELBOURNE, FL. 32904	ini <sub>s</sub>	P	1
lament a outs	NOTA LOR	ည်း သူ	***************************************

LEONARD NILE

Typed or printed name of signee

≓o:

 $\circ$