

Division of Corporations

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Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850) 205-0383

From:

Account Name : GERALD WEINBERG, P.C.
Account Number : 120030000043
Phone : (800) 342-9856
Fax Number : (800) 354-3381

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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LIMITED LIABILITY COMPANY

PAUL HOMES GEM LLC

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$125.00

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ARTICLES OF ORGANIZATION
FOR
FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Paul Homes Gem LLC

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:

106 FANSHAW AVE.
YONKERS, NY 10705

Mailing Address:

Edward Nukko
106 FANSHAW AVE
YONKERS, NY 10705

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

The name and the Florida street address of the registered agent are:

NationsCorp. Registered Agents, Inc.

Name

516 E. Park Avenue

Florida street address (P.O. Box NOT acceptable)

Tallahassee FLORIDA 32301

City, State, and Zip

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, Florida Statutes.

ABSON HAND

Registered Agent's Signature

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SECTION 608
FLORIDA STATUTES

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ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

Title:

"MGR" - Manager

"MGRM" - Managing Member

Name and Address:

MGR

Edward Nukho
18 EICHIE DRIVE
YONKERS, NY 10705

MGR

GEORGE Nukho
2 WINGATE DR
YONKERS, NY 10705

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TALLAHASSEE, FLORIDA

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(Use attachment if necessary)

NOTE: An additional article must be added if an effective date is requested.

REQUIRED SIGNATURE:

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

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

Edward Nukho
Typed or printed name of signer

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