

104060071085

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

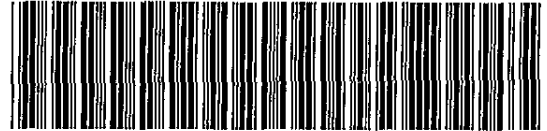
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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TALLAHASSEE, FLORIDA

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DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

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OFFICE USE ONLY(DOCUMENT #)

LAZARUS CORPORATE FILING SERVICE

3320 S.W. 87 AVENUE

MIAMI, FLORIDA (305)552-5973

OFFICE USE ONLY

CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known):

1. NXTUSA, LLC (Corporation Name) (Document #)
2. _____ (Corporation Name) (Document #)
3. _____ (Corporation Name) (Document #)
4. _____ (Corporation Name) (Document #)

☒ Walk in ☒ Pick up time 2.00 ☒ Certified Copy
☐ Mail out ☐ Will wait ☐ Photocopy ☐ Certificate of Status

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| NEW FILINGS | |
|-------------------------------------|-------------------|
| <input type="checkbox"/> | Profit |
| <input type="checkbox"/> | NonProfit |
| <input checked="" type="checkbox"/> | Limited Liability |
| <input type="checkbox"/> | Domestication |
| <input type="checkbox"/> | Other |

| AMENDMENTS | |
|--------------------------|---------------------------------------|
| <input type="checkbox"/> | Amendment |
| <input type="checkbox"/> | Resignation of R.A., Officer/Director |
| <input type="checkbox"/> | Change of Registered Agent |
| <input type="checkbox"/> | Dissolution/Withdrawal |
| <input type="checkbox"/> | Merger |

| OTHER FILINGS | |
|--------------------------|------------------|
| <input type="checkbox"/> | Annual Report |
| <input type="checkbox"/> | Fictitious Name |
| <input type="checkbox"/> | Name Reservation |

| REGISTRATION/ QUALIFICATION | |
|--------------------------------|---------------------|
| <input type="checkbox"/> | Foreign |
| <input type="checkbox"/> | Limited Partnership |
| <input type="checkbox"/> | Reinstatement |
| <input type="checkbox"/> | Trademark |
| <input type="checkbox"/> | Other |

Examiner's Initials

**ARTICLES OF ORGANIZATION
NXTUSA., LLC.**

**ARTICLE I
NAME**

The name of the Limited Liability Company shall be: NXTUSA., LLC.

**ARTICLE II
ADDRESS**

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

8307 SW 142 Ave.
Suite F105
Miami, FL 33183

**ARTICLE III
REGISTERED AGENT**

The name and street address of the Limited Liability Company's initial Registered Agent for service of process in this State is as follows: German Pena P.A., 9010 SW 137 Ave. Suite 113, Miami, FL 33186.

**ARTICLE IV
MANAGEMENT**

The Limited Liability Company will be a manager-managed company and the name and address of the initial manager is:

Nestor A. Velasco
8307 SW 142 Ave.
Suite F105
Miami, FL., 33183

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The managers may be changed, or additional managers may be added, as provided by the Operating Agreement.

ARTICLE V MEMBERS

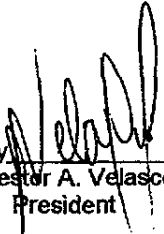
The initial member of the Limited Liability Company is: Nestor A. Velasco, as to 100 % membership interest.

ARTICLE VI TRANSFER OF INTERESTS

A member may not assign or transfer his or her interest in the Company except as may be permitted by the Operating Agreement.

ARTICLE VII MEMBERS RIGHTS TO CONTINUE BUSINESS:

The remaining members of the limited liability company will have the right to continue the business on the death, retirement, resignation, expulsion, bankruptcy, or dissolution of a member or the occurrence of any other event which terminates the continued membership of a member in the limited liability company, subject to such provisions governing such event as may be set forth in the Operating Agreement.

By 
Nestor A. Velasco.
President

(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).

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


**PURSUANT TO THE PROVISIONS OF SECTION 608.415 OR 608.607, FLORIDA STATUTES, THE
UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO
DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.**

**1. The name of the limited liability company is:
NXTUSA, LLC.**

2. The name and the Florida street address of the registered agent is:

**German Pena P.A
9010 SW 137 Ave.
Suite 113
Miami, FL, 33186**

**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.**


German Pena, P.A.

**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**

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