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## TRANSMITTAL LETTER

TO: Registration Section Division of Corporations		
NOVA (AR/EQTAIDAT ODOUBLE O		
SUBJECT: NOVA INVESTMENT GROUP, LLC (Name of Limited Liability Company)		
(Name of Limited Liability Company)		
The enclosed Articles of Organization and fee(s) are submitted for filing.  Please return all correspondence concerning this matter to the following:		
()	vame of Person)	<del>············</del>
(I	Firm/Company)	
1900 TAYLOR ST #430		
	(Address)	<del></del>
HOLLYWOOD, FL 33020		
(City/State and Zip Code)		
For further information concerning this matter, please	call:	
	at (954) 290 6074	
(Name of Person)	(Area Code & Daytime Te	lephone Number)
Enclosed is a check for the following amount:		
☐ \$125.00 Filing Fee ☐ \$130.00 Filing Fee &	☐ \$155.00 Filing Fee &	□ \$160.00 Filing Fee,
Certificate of Status	Certified Copy	Certificate of Status &
	(additional copy is enclosed)	Certified Copy (additional copy is enclosed)
STREET ADDRESS:	MAILING ADDRESS:	
Registration Section Division of Corporations	Registration Section Division of Corporations	
409 E. Gaines Street	P.O. Box 6327	
Tallahassee, Florida 32399	Tallahassee, Florida 32314	

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the Limited Liability Compa	any is:
NOVA INVESTMENT GROUP, LLC	
ARTICLE II - Address: The mailing address and street address of	the principal office of the Limited Liability Company is
Principal Office Address:	Mailing Address:
1900 TAYLOR ST #430	1900 TAYLOR ST #430
	HOLLYWOOD, FL 33020
HOLLYWOOD, FL 33020	
	istered Office, & Registered Agent's Signature: of the registered agent are:

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

HOLLYWOOD, FL 33020 FL

City, State, and Zip

1900 TAYLOR ST #430

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

(CONTINUED)

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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:

<u>Fitle:</u>	Name and Address:
"MGR" = Manager "MGRM" = Managing Member	
MGR	GLEN MURPHY
_	1900 TAYLOR ST #430
es e 1	HOLLYWOOD, FL 33020
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ing and the second seco	
(Use attachment if necessary)	
NOTE: An additional article n	nust be added if an effective date is requested.
Wie. An additional at ticle is	hust be added it an effective date is requested.
REQUIRED SIGNATURE:	
Signature of a m	ember or an authorized representative of a member.
of this document	ith section 608.408(3), Florida Statutes, the execution constitutes an affirmation under the penalties of perjury ated herein are true.)
GLEN MURPH	Υ

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)

Typed or printed name of signee