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(Requestor's Name)

(Address)

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(Business Entity Name)

(Document Number)

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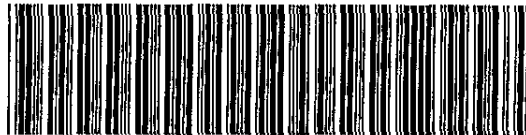
Special Instructions to Filing Officer:

W04-47041

2595

1/12/05

Office Use Only



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12/15/04--01014--009 **155.00

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2005 JAN 12 AM 8:12
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood
Secretary of State

December 27, 2004

BEATRIZ TREPTOW
101 OCEAN LANE STE. 109
KEY BISCAYNE, FL 33149

SUBJECT: NEA EVENTS
Ref. Number: W04000047041

We have received your document for NEA EVENTS and your check(s) totaling \$155.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of a Limited Liability Company must end with the words "limited company", "limited liability company" or their abbreviation "Ltd. Co." "L.C." or "L.L.C."

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6890.

Jason Merrick
Document Specialist

Letter Number: 904A00071476

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TALLAHASSEE, FLORIDA

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: NEA EVENTS
(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:

Beatriz Treptow
(Name of Person)

NEA EVENTS
(Firm/Company)

101 OCEAN LANE Suite 109
(Address)

Key Biscayne FL 33149
(City/State and Zip Code)

For further information concerning this matter, please call:

Beatriz Treptow at (305) 361-7608
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- ☐ \$125.00 Filing Fee ☐ \$130.00 Filing Fee & Certificate of Status ☒ \$155.00 Filing Fee & Certified Copy (additional copy is enclosed) ☐ \$160.00 Filing Fee & Certificate of Status & Certified Copy (additional copy is enclosed)

STREET ADDRESS:
Registration Section
Division of Corporations
409 E. Gaines Street
Tallahassee, Florida 32399

MAILING ADDRESS:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

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TALLAHASSEE, FLORIDA

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

NCA EVENTS 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:

101 OCEAN LANE SUITE 109
Key Biscayne
Florida 33149

4834 S FORESTVILLE
CHICAGO IL 60615

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

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

Beatrix Treptow
Name

101, OCEAN, LANE SUITE 109
Florida street address (P.O. Box **NOT** acceptable)

Key Biscayne FL 33149
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, F.S.

Beatrix Treptow
Registered Agent's Signature

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TALLAHASSEE, FLORIDA
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(CONTINUED)

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

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

Title:

Name and Address:

"MGR" = Manager

"MGRM" = Managing Member

MGR

RONALD L TAYLOR
4834 S Forrestville
Chicago IL 60615

MGR

BROTHZ TREPLOW
101 OCEAN LANE
Key Biscayne FL 33149

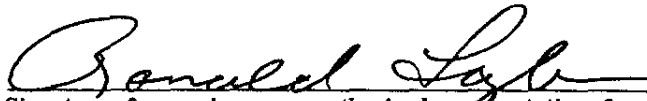
MGRM

RYAN TAYLOR
4834 S Forrestville
Chicago IL 60615

(Use attachment if necessary)

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

REQUIRED SIGNATURE:



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.)

RONALD TAYLOR

Typed or printed name of signee

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)

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TALLAHASSEE, FLORIDA

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