

Division of Corporations Public Access System

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Division of Corporations

Fax Number : (850)205-0383

Account Name : EMPIRE CORPORATE KIT COMPANY

Account Number: 072450003255

Phone : (305) 634-3694 Fax Number

: (305)633-9696

## LIMITED LIABILITY COMPANY

nyc investment group, Ilc

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Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$155.00

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### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is	:
NYC Investment Group, LLC	
ARTICLE II - Address: The mailing address and street address of the p	rincipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
17555 Collins Ave., Suite 2206 Sunny Islas, FL 33160	Mailing Address:  17555 Collins Ave., Suite 2206  Sunny Isles, FL 33160
ARTICLE III - Registered Agent, Registered	1 Office, & Registered Agent's Signature:
The name and the Florida street address of the	registered agent are:
Leon KANI	FER DES
Name	
17555 Collins Ave, Suite 2206	i
Florida street ade	treas (P.O. Box <u>NOT</u> acceptable)
Suriny Isles	FL 33160
City, State, a	and Zip
VW	

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:

Title: "MGR" = Mans "MGRM" = Ma		Name and Address:	
MGR		Leon KANFER	
WOOT TO THE PARTY OF THE PARTY		17555 Collins Ave., Suite 2206	
		Sunny Isles, FL 33160	
*			
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(Use attachment	if necessary)		2015 # R 16 # 10: 13
NOTE: An add	itional article must be a	idded if an effective date is requested.	影る
REQUIRED SIG	GNATURE:		75
	heon K	iage	
	Signature of a member or a	in authorized representative of a member.	
	(In accordance with section ( of this document constitutes that the facts stated herein	508,408(3), Fiorida Statutes, the execution an affirmation under the penalties of perjury are true.)	
		eon KANFER	
	Typei or	printed name of signee	
Faine Feer	•		

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\$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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