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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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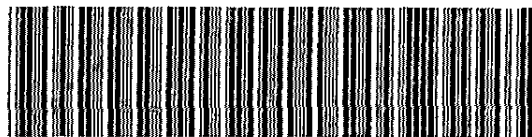
(Business Entity Name)

(Document Number)

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05 APR 11 PM 10:40
TALIAFERRO, LINDA

T. Brumbley APR 13 2005

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: NELLUM ASSOCIATES, LLC
(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:

EDWARD MULLEN
(Name of Person)

(Firm/Company)

2110 NORTH OCEAN BLVD #1604
(Address)

FORT LAUDERDALE, FL 33305
(City/State and Zip Code)

For further information concerning this matter, please call:

EDWARD MULLEN at (954) 568-5800
(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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05 APR 11 AM 10:40
TALLAHASSEE, FLORIDA
SECRETARY OF STATE

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

NELLUM ASSOCIATES, 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:

2455 EAST SUNRISE BLVD #1105
FORT LAUDERDALE, FL 33304

SAME

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

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

EDWARD MULLEN

Name

306 GRAND KEY TERRACE

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

PALM BEACH GARDEN FL 33418

City, State, and Zip

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05 APR 11 AM 10:40
TALLAHASSEE - FLORIDA
STATE

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.

Edward Mullen

Registered Agent's Signature

(CONTINUED)

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:

MGRM

EDWARD MULLEN
2115 NORTH OCEAN BLVD #1604
FORT LAUDERDALE, FL 33305

MGRM

ARNOLD MULLEN
306 GRAND KEY TERRACE
PALM BEACH GARDENS, FL 33418

MGRM

SHIRLEY MULLEN
306 GRAND KEY TERRACE
PALM BEACH GARDENS, FL 33418

(Use attachment if necessary)

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

REQUIRED SIGNATURE:

 Managing Member

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 MULLEN, MANAGING MEMBER

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)