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(Ac	ldress)	
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(Cit	ty/State/Zip/Phon	e #)
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(Bu	siness Entity Nar	ne)
(Do	cument Number)	
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Certified Copies	Certificates	of Status
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Special Instructions to	Filing Officer:	
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Office Use Only



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05 APR 15 PN 3: NA

TRANSMITTAL LETTER

Division of Corporations	
$\lambda i = \frac{1}{2} + \frac{1}{2} $	pment, LLC Impany)
The enclosed Articles of Organization and fee(s) are submitted for filing	ng.
Please return all correspondence concerning this matter to the following	g:
Latasha T. Murray & Noch Muri	ray, dr.
Noah & Tec Development, L	LLC
Post- Office Box 2291 (Address)	OS APR I
Quincy Florida 32353 (City/State and Zip Code)	APR 15 PH 3: 44 AHASSEE FLORID
For further information concerning this matter, please call:	# +
Latasha Murray at (850 (Area Code &	980-8644 & Daytime Telephone Number)
Enclosed is a check for the following amount:	
S125.00 Filing Fee Status S155.00 Filing Certified Copy (additional copy is	Certificate of Status &
STREET ADDRESS:	MAILING ADDRESS:
Registration Section Division of Corporations	Registration Section Division of Corporations
409 E. Gaines Street Tallahassee, Florida 32399	P.O. Box 6327 Tallahassee, Florida 32314
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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Nogh & Tee Development, LLC

ARTICLE II - Address:

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

Principal Office Address:

131 Chadd LANE Gretna, Florida 32332 Mailing Address:

P.O. Box 2291 Quincy, Florida 32353

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

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

Name

Latasha T. Murray

Name

131 Chadd Lane

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

GretNA, Florida FL 32332

City, State, and Zip

05 APR 15 PH 3:

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)

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 Mem	Name and Address:	
MGR	Nooh Murray Jr. 131 Chadd Lone Grotna Fl. 32332	
MGR	Latasha T. Murray 131 Chadd Lone Gretna, Fl 32332	
(Use attachment if necessary))	
NOTE: An additional artic	ele must be added if an effective date is requested.	
REQUIRED SIGNATURE:	Start J. Mures SS	
(In accordation of this document the fact		
	Typed or printed name of Signee	
	Filing Fees: \$100.00 Filing Fee for Articles of Organization \$ 25.00 Designation of Registered Agent	

Page 2 of 2

\$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)