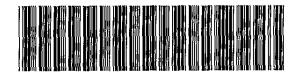
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ACCOUNT NO. : 072100000032 REFERENCE : 489676 **AUTHORIZATION:** \$ 125.00 COST LIMIT : ORDER DATE: July 18, 2005 ORDER TIME : 3:38 PM ORDER NO. : 489676-010 CUSTOMER NO: 7112600 CUSTOMER: Kathy Kolakowski Mcintyre & Company 191 Woodport Road Sparta, NJ 07871 DOMESTIC FILING NAME: NFE PRODUCTS LLC EFFECTIVE DATE: ARTICLES OF INCORPORATION CERTIFICATE OF LIMITED PARTNERSHIP ARTICLES OF ORGANIZATION PLEASE RETURN THE FOLLOWING AS PROOF OF FILING: CERTIFIED COPY PLAIN STAMPED COPY CERTIFICATE OF GOOD STANDING CONTACT PERSON: Sara Lea - EXT. 2914

EXAMINER'S INITIALS:

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

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ARTICLE I - Name:
The name of the Limited Liability Company is:

NFE Products 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:
Unit 703	same.
Ft. Meyers FL 33913	

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: The name and the Florida street address of the registered agent are:

Kathleen Medore

Name

11023 Mill Creek Way Unit 703

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

Ft. Mayors FLORDA 33913
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, Florida Statutes..

Registered Agent's Signature

Page 1 of 2 (CONTINUED) ARTICLE IV-Manager(s) or Managing Member(s):

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

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:
MGRM	Kuthleen Medore 11023 Mill Creek Way Unit 703 Et. Meyers FL 339130
MGRM	Joicen A. Medore Hoas Mulcreekhny Unit 703 H Meyers FL 33913
MGRM	Victor J. Medore 11023 Mill Creek Way Unit 703 Et Meyers FL 33913

(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.)

By: Fellx McInture

Filing Fees:

\$100.00 Filing Fee for Articles of Organization

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)