Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H05000171805 3)))

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850) 205-0383

From:

Account Name : THOMAS M. CLARK, P.A.

Account Number : 072100000445
Phone : (954)776-3800
Fax Number : (954)776-3825

DIVISION OF CORPORATION

LIMITED LIABILITY COMPANY

NRDD, LLC

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$125.00

Electronic Filing Menu

Corporate Filing

Public Access Help

J. BRYAN JUL 1 9 2005

Fax Audit No.

H05000171805 3

# ARTICLES OF ORGANIZATION OF NRDD, LLC

## ARTICLE ONE

The name of this limited liability company shall be NRDD, LLC

## ARTICLE TWO

The period of duration shall be perpetual.

## ARTICLE THREE

This limited liability company is organized for the purpose of transacting any or all legal business.

#### ARTICLE FOUR

The street address of the principal office of this limited liability company shall be 3001 State Road 84, Fort Lauderdale, Florida 33312. The mailing address of this limited liability company shall be P. O. Box 4127, Wilmington, North Carolina 28406. The initial registered agent shall be Thomas M. Clark, 2400 East Commercial Boulevard, Suite 820, Florida Lauderdale, Florida 33308.

## ARTICLE FIVE

This limited liability company has at least one member and the total amount of cash contribution required shall be \$100.00. There shall be no property other than cash contributed.

#### ARTICLE SIX

There shall be no additional contributions required by the member.

## ARTICLE SEVEN

There shall be no additional members of this limited liability company, except as provided by Amendment to these Articles of Organization.

## ARTICLE EIGHT

Fax Audit No.

H05000171805 3



Fax Audit No.

H05000171805 3

The remaining members, if any, of this limited liability company shall have the right to continue the business of this limited liability company upon the death, retirement, resignation, expulsion, bankruptcy or dissolution of any member or the occurrence of any other event which terminates the continued membership of a member in this limited liability company.

## ARTICLE NINE

This limited liability company shall be managed by a manager or managers. and address of the member of this limited liability company is as follows:

> B. Rex Stephens 5022 Wrightsville Avenue Wilmington, N. C. 28403

#### ARTICLE TEN

The member of this limited liability company shall own an undivided one hundred percent (100%) interest therein and the member shall contribute one hundred percent (100%) of the cash contribution set forth hereinabove.

IN WITNESS WHEREOF, the undersigned authorized representative of the member has executed these Articles of Organization on the /5 day of July, 2005.

STATE OF FLORIDA COUNTY OF BROWARD

BEFORE ME, personally appeared Thomas M. Clark, to me well known and known to me to be the person described in, and who acknowledged to and before me that he executed said document for the purposes therein expressed.

WITNESS my hand and official seal this //

day of July, 2005.

My Commission Expires:

(Notarial Sezi)

GINNY GIANNETTI MY COMMISSION # DEGISTER 3 EXPIRES: November 09, 2007 

Fax Audit No.

H05000€71805 3

15-Jul-2005 05:03pm From-Thomas M. Clark, P.A. H05000171805 3

## CERTIFICATE DESIGNATING PLACE OF BUSINESS OR DOMICILE FOR THE SERVICE OF PROCESS WITHIN FLORIDA NAMING AGENT UPON WHOM PROCESS MAY BE SERVED

IN COMPLIANCE WITH SECTION 48.091, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED:

FIRST THAT THE NRDD, LLC DESIRING TO ORGANIZE OR QUALIFY UNDER THE LAWS OF THE STATE OF FLORIDA, WITH ITS PRINCIPAL PLACE OF BUSINESS AT THE CITY OF FORT LAUDERDALE, STATE OF FLORIDA, HAS NAMED THOMAS M. CLARK, AT 2400 EAST COMMERCIAL BOULEVARD, SUITE 820, FORT LAUDERDALE, FLORIDA 33308 AS ITS AGENT TO ACCEPT SERVICE OF PROCESS WITHIN FLORIDA.

SIGNATURE:

THOMAS M. CLARK

TITLE: AUTHORIZED REPRESENTATIVE

OF MEMBERS

DATE:

JULY 15, 2005

HAVING BEEN NAMED TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED LIMITED LIABILITY COMPANY AT THE PLACE DESIGNATED IN THIS CERTIFICATE, I HEREBY AGREE TO ACT IN THIS CAPACITY, AND I FURTHER ACCEPT TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATIVE TO THE PROPER AND COMPLETE PERFORMANCE OF MY DUTIES.

SIGNATURE:

THOMAS M. CLARK, REGISTERED AGENT

DATE:

JULY 15, 2005