

L05000074628

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

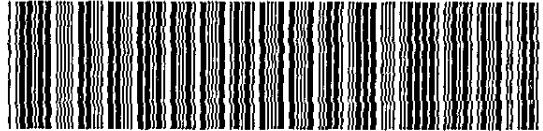
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05 JUL 29 PM 12:28

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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05 JUL 29 AM 10:55

DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

Charter Number Only

7-28-05

Requestor's Name

Address

City

State

ZIP

Phone

VALIDATION ONLY

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

CORPORATION(S) NAME

NO LIMITS INVESTMENT, LLC

☐ Profit

☐ NonProfit

☐ Amendment

☐ Merger

☐ Foreign

☐ Dissolution

☐ Mark

☐ Limited Partnership

☐ Annual Report

☒ Other LLC

☐ Reinstatement

☐ Reservation

☐ Change of Registered Agent

☒ Certified Copy

☐ Photo Copies

☐ Certificate Under Seal

☐ Call When Ready

☐ Call If Problem

☐ After 4:30

☒ Walk In

☐ Will Wait

☒ Pick Up

☐ Mail Out

Name

Availability

Document

Examiner

Updater

Verifier

Acknowledgment

W P Verifier

Empire Toll Free: 1-800-432-3028

Date:

July 15, 2005

**FILED**  
05 JUL 29 PM 12:28  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Ms. Linda Weinstein  
Daily Business Review  
324 Datura Street, Suite 140  
West Palm Beach, Florida 33401

Re: Incorporation of

No Limits Investment LLC

Dear Ms. Weinstein:

I am forwarding the enclosed paperwork to request the incorporation of No Limits Investment LLC a Limited Liability Corporation. Enclosed you will also find a Money Order in the amount of \$ 155.00, for the State of Florida fees which is payable to the Secretary of the State of Florida. Additionally, I have enclosed \$92.12 for the Incorporation book, seal, bi-laws & minutes, and twenty (20) stocks/and or certificates.

Upon completion of the incorporation of No Limits Investment LLC, please return the completed package to the following:

Attn: Sandra Walker  
1750 NW 175 Street  
Miami, Florida 33056

If you have any questions, or require any additional documents, please contact me at (786) 262-2112. Your assistance and immediate attention to this matter is greatly appreciated.

Sincerely,



Sandra Walker

**ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY**

**ARTICLE I - Name:**

The name of the Limited Liability Company is:

No Limits Investment LLC

**ARTICLE II - Address:**

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


2240 NW 171 Terrace  
Miami Gardens, Fla. 33056

**ARTICLE III - Registered Agent and Registered Office:**

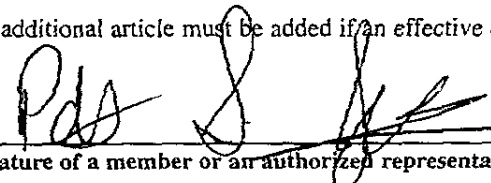
The name and the Florida street address of the registered agent is:

YALANDA WALKER  
Name  
1750 NW 175 ST  
Florida street address (P.O. Box **NOT** acceptable)  
Miami Gardens FL 33056  
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, F.S.*

  
Registered Agent's Signature

(An additional article must be added if an effective date is requested)

  
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.)

Patricia S. Johnson  
Typed or printed name of signee

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JUL 29 PM 12:28  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**CERTIFICATE OF DESIGNATION  
REGISTERED AGENT / REGISTERED OFFICE**

Pursuant to the provisions of section 607.0501, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, submits the following statement in designating the registered office/registered agent, in the state of Florida.

First that NO LIMITS INVESTMENT LLC  
desiring to organize under the laws of the State of Florida  
with its principal office, as indicated in the articles of incorporation has  
named YALANDA WALKER  
located at 1750 NW 175 ST  
City of MIAMI GARDENS County of MIAMI-DADE State of Florida,  
as its agent to accept service of process within the state.

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED CORPORATION 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.

SIGNATURE

Yalanda Walker  
Registered Agent