

205000115344

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

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(Business Entity Name)

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Certificates of Status _____

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11/14/05--01052--015 **87.50

11/29/05--01026--001 **37.50

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
2005 NOV 29 PM 12:00

FF \$125

DB

205-51058



FLORIDA DEPARTMENT OF STATE
Glenda E. Hood
Secretary of State

November 15, 2005

STANLEY J RICHARDSON
777 S FLAGLER DR 800W
WEST PALM BEACH, FL 33401

SUBJECT: NW CAPITAL PARTNERS, LLC
Ref. Number: W05000051058

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We have received your document for NW CAPITAL PARTNERS, LLC and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The corporate name must contain a suffix that will clearly indicate that it is a corporation. Such suffixes include: CORPORATION, CORP., COMPANY, CO., INC., and INCORPORATED.

An effective date may be added to the Articles of Incorporation if a 2006 date is needed, otherwise the date of receipt will be the file date. A separate article must be added to the Articles of Incorporation for the effective date.

Please return the original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6929.

Justin M Shivers
Document Specialist
NEW FILINGS

Letter Number: 105A00067632

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: NW CAPITAL PARTNERS, 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:

Stanley J. Richardson, CEO
(Name of Person)

NW Communities Dev. Partnerships Inc
(Firm/Company)

777 S. Flagler 800 W
(Address)

WEST PALM BEACH, FL 33401
(City/State and Zip Code)

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For further information concerning this matter, please call:

Stanley J. Richardson at (561) 515-6091
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount: \$ 37.50

- ☐ \$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)

Mailing Address
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street/Courier Address
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

NW CAPITAL PARTNERS, LLC

(Must end with the words "Limited Liability Company," "Limited Company" or their abbreviation "LLC," or "L.C.,")

ARTICLE II - Address:

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

Principal Office Address:

Mailing Address:

Stanley J. Richardson
777 S. Flagler 800W
West PALM BEACH, FL 33401

Stanley J. Richardson
777 S. Flagler 800W
West PALM BEACH, FL 33401

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

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

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

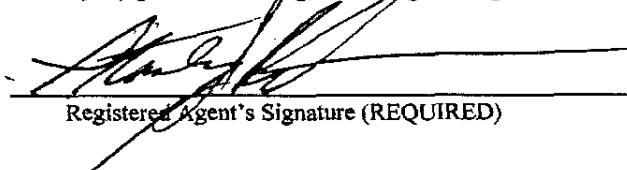
Stanley J. Richardson
Name

777 S. Flagler 800W
Florida street address (P.O. Box NOT acceptable)

West PALM BEACH FL 33401
City, State, and Zip

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DIVISION OF CORPORATIONS
2005 NOV 29 PM 12:01

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 (REQUIRED)

(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:

President

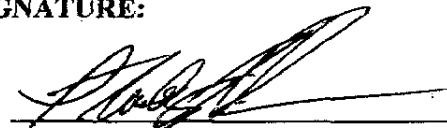
Stanley J. RICHARDSON
777 S. FLAGLER BOULEVARD
WEST PALM BEACH, FL 33401

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: _____ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

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.)

Stanley J. Richardson

Typed or printed name of signee

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DIVISION OF CORPORATION
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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)