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SLUTA HASSEE, FLORIDA



# **COVER LETTER**

TO: Registration Se Division of Co						
SUBJECT: Nomition	: Business Initiative, L	.LC				
	(Name of Limite	d Liability Compa	ny)			
The enclosed Articles o	f Organization and fee(s) are s	ubmitted for filing				
Please return all corresp	ondence concerning this matte	er to the following:				
Theresa C	Lutz					
	(	Name of Person)				
Nomitic Bu	siness Initiative, LLC	>				
	(	Firm/Company)				
796 Fir Ave ₹⇔ S.					7 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	
		(Address)			TEB TEB	
Frostproof	f FI 33843			·	27	
	(City	/State and Zip Code)	)	· · · <del></del>	是 是	
For further information	concerning this matter, please	call:			PM 3: 54 EE, FLORID	****
Theresa C Lutz		at (863	605-381			
(Name	e of Person)	(Area Code	& Daytime To	elephone Number	•	
Enclosed is a check for	or the following amount:					
\$125.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	\$155.00 Fill Certified Copy (additional copy i	,	\$160.00 I Certificate of Certified Co (additional cop	ру	
	Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Registration of Clifton But 2661 Execution 2661 Execution 2661 Execution Registration Registrati	urier Address on Section of Corporatio uilding cutive Center ee, FL 32301	ns · Circle		

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:	
The name of the Limited Liability Company	is:
Nomitic Business Initiative, LLC	
(Must end with the words "Limited Liability Company, "L	imited Company" or their abbreviation "LLC," or "L.C.,")
ARTICLE II - Address:	
The mailing address and street address of the	e principal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
796 Fir Ave	same
Frostproof FI	<u> </u>
33843	
	E 2
	ered Office, & Registered Agent's Signature:
	Registered Agent. You must designate an individual or another 💢 🚺
business entity with an active Florida registration.)	1.6 w 1.
The name and the Florida street address of t	Registered Agent. You must designate an individual or antifier 고 다.
Theresa C Lutz	<i>y</i>
Na	ame
796 Fir Ave	· ·
Florida stree	t address (P.O. Box <u>NOT</u> acceptable)
Frostproof	FL 33843
City, St	ate, and Zip
TT + 1	to a control of an area of the attention and the attention
	I to accept service of process for the above stated limited
	l in this certificate, I hereby accept the appointment as
	acity. I further agree to comply with the provisions of all
	te performance of my duties, and I am familiar with and
accept the obligations of my position as i	registered agent as provided for in Chapter 608, F.S
	0 0
Muusa (	· dut
Registered Agent's S	ignature (REQUIRED)

(CONTINUED)
Page 1 of 2

### The name and address of each Manager or Managing Member is as follows: Title: Name and Address: "MGR" = Manager "MGRM" = Managing Member **MGRM** Jessica Aldrich 6665 Lake Clark Dr Lakeland, FL 33813 **MGRM** Thomas Carroll 840 Bear Creek Dr Bartow, FL 33830 **MGRM** Theresa C Lutz 796 Fir Ave Frostproof, FL 33843 MGRM Raymond Chase Razabdouski 4347 Shepherd Rd Lakeland, FL 33811 (Use attachment if necessary) See attachment **ARTICLE V:** Effective date, if other than the date of filing: (If an effective date is listed, the date must be specific and cannot be more than five business

### **REQUIRED SIGNATURE:**

to or 90 days after the date of filing.)

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.)

Theresa C Lutz

ARTICLE IV- Manager(s) or Managing Member(s):

Typed or printed name of signee

### 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)

Nomitic Business Initiative, LLC

Articles of Organization

Attachment 1 of 1

Article IV Managing Members (continued)

MGMR Alysia Reppeto-Evans

533 Duchess Ct Lakeland, FL 33803

MGMR Angela A Rivenshield Phd

930 McDonald St Lakeland, FL 33801

MGMR Gor A Rivenshield

930 McDonald St Lakeland, FL 33801

----END -----

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SECRE LING LUT STATE
VALLAHASSEE, FLORIDA