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106-29475

COVER LETTER

TO: Registration Se Division of Co			
SUBJECT:	NSD ENTERA (Name of Limited	PRISE LLC Liability Company)	
	(
The enclosed Articles of	f Organization and fee(s) are sul	bmitted for filing.	
Please return all corresp	ondence concerning this matter	to the following:	
	MR VINCE	Sinone //; ame of Person)	
	(N	ame of Person)	
	MSD ENTE	TEPUSE LLC	ك
	(F	'irm/Company)	
	202 B SE	(Address) (ACH, FLORID State and Zip Code)	IVE
	_	(Address)	
	JUNO BE	ACH, FLORID	A 33408
	(City/	State and Zip Code)	
For further information	concerning this matter, please c	all:	
De. 75 C	OTTA-TIETEOLUNGO	at (856) 630 -	6000 Ephone Number)
(Name	of Person)	(Area Code & Daytime Te	lephone Number)
			-
Enclosed is a check for	or the following amount:		
\$125.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	\$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	S160.00 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 Corporation Clifton Building 2661 Executive Center Tallahassee, FL 32301	ns

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p.Z

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

MSD ENTERPRI	sen; L.	LC
(Must and 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:

Frincing Outes Address:	William Andreis:
202 B SEA DATE DELVE TUNO BETCH, FL \$3408	JULO BEACH FL 33408

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: (The Umited Liability Company causes serve as its own Registered Agent. You must designate an individual or another husiness entity with an active Florida registration.)

The name and the Florido street address of the registered agent are;

SEA ORTS DRIVE
Florida street address (P.O. Box NOT acceptable)

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..

(CONTINUED) Page Lof2

"MGR" = Manager	Name and Address:
"MGRM" = Managing Member	
MGR	MARION L. CITTA 423 S. EGG HARBOR RD BLUE ALCHOR NJ 08037
MGRM	T.J. CITTA-PIETROLUNGO I 100 SPRINGDALE RD. A3#353
MERM	VINCE SIMONELLI 202B SER DATE DULLE
	JUNO BEACH, FL 33408
(Use attachment if necessary)	
CLE V: Effective date, if other than the	e date of filing: (OPTIONAL)
CLE V: Effective date, if other than the effective date is listed, the date must b	e date of filing: (OPTIONAL) De specific and cannot be more than five business days prior
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CLE V: Effective date, if other than the effective date is listed, the date must b 0 days after the date of filing.)	oe specific and cannot be more than five business days prior
CLE V: Effective date, if other than the effective date is listed, the date must be days after the date of filing.) REQUIRED SIGNATURE:	
CLE V: Effective date, if other than the effective date is listed, the date must be days after the date of filing.) REQUIRED SIGNATURE: Signature of a member of this document constitution.	per or an authorized representative of a member. ection 608.408(3), Florida Statutes, the execution attitutes an affirmation under the penalties of perjury
CLE V: Effective date, if other than the effective date is listed, the date must be do days after the date of filing.) REQUIRED SIGNATURE: Signature of a member of this document constitute the facts stated in the facts state	per or an authorized representative of a member. ection 608.408(3), Florida Statutes, the execution attitutes an affirmation under the penalties of perjury

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

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

\$125.00 Filing Fee for Articles of Organization and Designation

of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)