WS BUSINESS CENTER

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Florida Department of State

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To:

Division of Corporations

Fax Number : (850) 205-0383

From:

Account Name : WILLIAM J. STRANGE

Account Number : 119980000052 : (305)267-2767 Phone : (305)267-2775 Fax Number

FLORIDA/FOREIGN LIMITED LIABILITY CO.

NFC INVESTMENTS, L.L.C.

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#### ARTICLES OF ORGANIZATION

#### FOR

#### NFC INVESTMENTS, L.L.C.

#### ARTICLE I NAME

The name of the Limited Liability Company is NFC INVESTMENTS, L.L.C.

ARTICLE II
ADDRESS

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

> 6290 West 16<sup>TH</sup> Avenue Hialcah, Florida 33012

### ARTICLE III DURATION

The period of duration for the Limited Liability Company shall be perpetual.

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#### ARTICLE IV MANAGEMENT

The Limited Liability Company is to be managed by a manager or managers and the name(s) and address(es) of such manager(s) who is/are to serve as manager(s) is/are:

CARLA A. FONSECA (MGR) 6290 West 16<sup>TR</sup> Avenue Hialeah, Florida 33012

NOEL F. FONSECA (MGRM) 6290 West 16<sup>TH</sup> Avenue Hialeah, Florida 33012 SECRETARY OF STATE
DIVISION OF CORPORATION
2005 MAD 20 111 12: OF

The Limited Liability Company is to be managed by the members and the name(s) and address(cs) of the managing member(s)

Signature of almember or an authorized representative of a member

In accordance with section 608.408(3), Florida Statutes, the execution of this affidavit constitutes an affirmation under the penalties of perjury that the facts stated herein are true.

Type printed name of signee

WILLIAM J. STRANGE 1325 SW 87<sup>TH</sup> AVENUE MIAMI, FL 33174 PH. 305-267-2767 FAX 305-267-2775

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# ARTICLE V ADMISSION OF NEW MEMBERS

The right. If given, of the members to admit additional members and the terms and conditions of the admissions shall be determined by a majority of the voting members.

### ARTICLE VI MEMBERS RIGHTS TO CONTINUE BUSINESS

The right. If given, of the remaining members of the Limited Liability Company to continue the business on the death, retirement, resignation, expulsion, bankruptcy, or dissolution of the member or the occurrence of any other event which terminates the continued membership of a member in the Limited Liability Company shall be determined by a majority of the voting members.

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# CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

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

1. The name and address of the Registered Agent is:

NOEL F. FONSECA 6290 West 16<sup>TH</sup> Avenue Hialeah, Florida 33012 SECRETARY OF STATE OF CORPORATION OF CORPORATION OF CORPORATION 2010 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, Florida Statute.

Registered Agent's Signature

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