

Florida Department of State

Division of Corporations

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Fax Number : (850)205-0383

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**FLORIDA/FOREIGN LIMITED LIABILITY CO.**

**noso control, l.l.c.**

*DB*

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

**ARTICLE I - Name:**

The Name of the Limited Liability Company is:

**Noso Control, L.L.C.**

**ARTICLE II - Address:**

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

**12914 DUPONT CIRCLE, TAMPA FL 33626,**

**ARTICLE III - Duration:**

The period of duration for the Limited Liability Company shall be:

**Perpetual**

**ARTICLE IV - Management:**

The Limited Liability Company is to be managed by a manager and the name and address of such manager who is to serve as manager is:

**Michael Monsky  
12914 DUPONT CIRCLE, TAMPA FL 33626**

By: Michael Monsky  
**Michael Monsky**

(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.)

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**ARTICLE V - Admission of Additional Members:**

The right, if given, of the members to admit additional members and the terms and conditions of the admissions shall be:

Pursuant to the Management Agreement

**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 a member or the occurrence of any other event which terminates the continued membership of a member in the limited liability company shall be:

Pursuant to the Management Agreement

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

PURSUANT TO THE PROVISIONS OF SECTION 608.415 OR 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The name of the limited liability company is:

**Noso Control, L.L.C.**

1. The name of the Florida street address of the registered agent is:

**Michael Monsky**

Name


**12914 DUPONT CIRCLE, TAMPA FL 33626**  
Street Address, City, State and Zip

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*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.*

  
Michael Monsky

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