(Requestor's Name)				
(Address)				
(Address)				
(Cit	ty/State/Zip/Phone	#)		
PICK-UP	☐ WAIT	MAIL .		
(Business Entity Name)				
(Document Number)				
Certified Copies	_ Certificates	of Status		
Special Instructions to Filing Officer:				
		(Alle)		

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Office Use Only



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# **COVER LETTER**

TO:

Registration Section

Divis	ion of Corporations			
SUBJECT: _	North		tug	
	(Name of	Limited Liability Company)		•
The enclosed A	Articles of Organization and fee(s	) are submitted for filing.	TAL TAL	0.
Please return a	ll correspondence concerning this	s matter to the following:	F.C.	7
	11.11.		III AN	3
	Mike Dug		SSI	
		(Name of Person)	m <sub>o</sub>	2 M
	Ja Opuat	un Group	(F) [S]	- O
	•	(Firm/Company)	in the second	6
	214 1	ell ST	<del></del> .	
		(Address)		<del></del>
	$\bigcirc$			_
<del></del>	Allan	de Ux	223,4	
		(City/State and Zip Code)	The second second	
		,		
For further info	ormation concerning this matter, p	please call:		
(Ma	461	at(703_)6e	0 945/	
	(Name of Person)	(Area Code & Da	ytime Telephone Number	r)
Enclosed is a	check for the following amour	nt:	•	
\$125.00 Fili	ng Fee \$\int \\$130.00 \text{ Filing For Certificate of Status}	ee & S155.00 Filing F Certified Copy (additional copy is enclo	Certificate of Certified Co	
	Mailing Address Registration Section Division of Corporati P.O. Box 6327 Tallahassee, FL 3231	Clifton Building	tion porations  Center Circle	

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

**ARTICLE I - Name:** 

The name of the Limited Liability Company is:

NONTH GASSEN CONSUL	Ang UC			
(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 princi	pal office of the Limited Liability Company is:			
Principal Office Address:	lailing Address:			
310 N. GADSEN ST	214 Sefferen ST			
Tallahassu	Elerante UN			
- 710 32301 _	22304			
The name and the Florida street address of the registered agent are:    MICHAEL DUGAN   Florida street address (P.O. Box NOT acceptable)   MICHAEL DUGAN   Florida street address (P.O. Box NOT acceptable)   MICHAEL DUGAN   Florida street address (P.O. Box NOT acceptable)   MICHAEL DUGAN   Florida street address (P.O. Box NOT acceptable)   MICHAEL DUGAN   Florida street address (P.O. Box NOT acceptable)   MICHAEL DUGAN   Florida street address (P.O. Box NOT acceptable)   MICHAEL DUGAN   Florida street address (P.O. Box NOT acceptable)   MICHAEL DUGAN   Florida street address (P.O. Box NOT acceptable)   MICHAEL DUGAN   Florida street address (P.O. Box NOT acceptable)   MICHAEL DUGAN   Florida street address (P.O. Box NOT acceptable)   MICHAEL DUGAN   Florida street address (P.O. Box NOT acceptable)   MICHAEL DUGAN   Florida street address (P.O. Box NOT acceptable)   MICHAEL DUGAN   Florida street address (P.O. Box NOT acceptable)   MICHAEL DUGAN   Florida street address (P.O. Box NOT acceptable)   MICHAEL DUGAN   Florida street address (P.O. Box NOT acceptable)   MICHAEL DUGAN   Florida street address (P.O. Box NOT acceptable)   MICHAEL DUGAN   Florida street address (P.O. Box NOT acceptable)   MICHAEL DUGAN   Florida street address (P.O. Box NOT acceptable)   MICHAEL DUGAN   Florida street address (P.O. Box NOT acceptable)   MICHAEL DUGAN   Florida street address (P.O. Box NOT acceptable)   MICHAEL DUGAN   Florida street address (P.O. Box NOT acceptable)   MICHAEL DUGAN   Florida street address (P.O. Box NOT acceptable)   MICHAEL DUGAN   Florida street address (P.O. Box NOT acceptable)   MICHAEL DUGAN   Florida street address (P.O. Box NOT acceptable)   MICHAEL DUGAN   Florida street address (P.O. Box NOT acceptable)   MICHAEL DUGAN   Florida street address (P.O. Box NOT acceptable)   MICHAEL DUGAN   Florida street address (P.O. Box NOT acceptable)   MICHAEL DUGAN   Florida street address (P.O. Box NOT acceptable)   MICHAEL DUGAN   Florida street address (P.O. Box NOT acceptable)   MICHAEL DUGAN   Florida street				
Having been named as registered agent and to accelliability company at the place designated in this cregistered agent and agree to act in this capacity. It is statutes relating to the proper and complete performaccept the obligations of my position as registered. Registered Agent's Signature (I	rertificate, I hereby accept the appointment as further agree to comply with the provisions of all mance of my duties, and I am familiar with and			

(CONTINUED) Page 1 of 2

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

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

Title:	Name and Address:
"MGR" = Manager "MGRM" = Managing Member	
MGR	Mike DIGAN
	alexander VA 22314
MGRM	There des Digan
	alsodudia VA 22314
MERM	971 SEC ALL
	SX C
Carlotte Art Land Carlotte	
	© <u>⊬</u> <b>6</b>
(Use attachment if necessary)	
	date of filing: 775 600 / (OPTIONAL)
(If an effective date is listed, the date must be	specific and cannot be more than five business days prior

(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.)

ICHAEL DUGAN

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)