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**EXAMINER** 

08 JUN 18 AH 9: 35 TALLAHASSEE, FLORIDA



Reinstatement

UCC FILING & SEARCH SERVICES, INC. 1574 Village Square Blvd Ste 100 Tallahassee, Florida 32309 (850) 681-6528

**HOLD** FOR PICKUP BY **UCC SERVICES** OFFICE USE ONLY

CORPORATION NAME (S) AND DOCUMENT NUMBER (S):

June 18, 2008 Nicosia. Filing Evidence **Type of Document** □ Certificate of Status □ Plain/Confirmation Copy □ Certified Copy ☐ Certificate of Good Standing □ Articles Only □ All Charter Documents to Include Articles & Amendments Retrieval Request □ Fictitious Name Certificate □ Photocopy □ Certified Copy □ Other **NEW FILINGS AMENDMENTS Profit** Amendment Non Profit Resignation of RA Officer/Director Limited Liability Change of Registered Agent X Domestication Dissolution/Withdrawal Other Merger OTHER FILINGS REGISTRATION/QUALIFICATION **Annual Reports** Foreign Fictitious Name Limited Liability Name Reservation Reinstatement

Trademark

Other

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:	00
The name of the Limited Liability Company is:	rincipal office of the Limited Liability Company is
Nicosia, LLC	
(Must end with the words "Limited Liability Company, "Limite	ed Company" or their abbreviation "LLC," or "L.C.,")
ADDICE D. I. A. P. L.	ې پې پې د د د د د د د د د د د د د د د د
ARTICLE II - Address:	single-laffing of the Limited Liebility Commence
The maining address and street address of the pr	rincipal office of the Limited Liability Company is
Principal Office Address:	Mailing Address:
5320 Delano Ct.	5320 Delano Ct.
Cape Coral, FL 33904	Cape Coral, FL 33904
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Regist business entity with an active Florida registration.)	
The name and the Florida street address of the re	egistered agent are:
NRAI Services, Inc.	
Name	
2731 Executive Park Dri	ve, Suite 4
Florida street add	ress (P.O. Box <u>NOT</u> acceptable)
Weston, FL 33331	FL
City, State, a	nd Zip

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..

Cogistered Agent's Signature (REQUIRED)

GALY Sharman, ASST. Sayata

(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: Name and Address: "MGR" = Manager "MGRM" = Managing Member MGRM Dominic Nicosia 2656 Fairmont Isle Circle Cape Coral, FL 33901 (Use attachment if necessary) \_\_\_\_\_. (OPTIONAL) 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 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

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)

Tam T. Ho, Esq.

that the facts stated herein are true.)