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To:

Division of Corporations
Fax Number : (850) 617-6383

From:

Account Name : INCORPORATING SERVICES FL
Account Number : I20050000032
Phone : (302) 531-0855
Fax Number : (866) 223-0765**FILED**
08 AUG 19 AM 7:40
SECRETARY OF STATE
TALLAHASSEE, FLORIDA**FLORIDA/FOREIGN LIMITED LIABILITY CO.****NBM, LLC**

Certificate of Status	0
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ARTICLES OF ORGANIZATION

The undersigned, in accordance with the provisions of the Florida Limited Liability Company Act, hereby states as follows:

1. The name of the Limited Liability Company (the "Company") is:

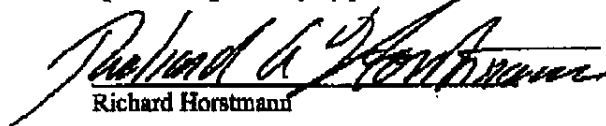
NBM, LLC

2. The mailing and street address of the principal offices of the Company c/o Richard A. Horstmann, 107 Bonaire Lane, Bonita Springs, FL 34134.

3. The name and Florida street address of the registered agent:

Richard Horstmann
107 Bonaire Lane
Bonita Springs, FL 34134

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.


Richard Horstmann

4. The name and address of each Manager is as follows:

Richard A. Horstmann, 107 Bonaire Lane, Bonita Springs, FL 34134

5. The term of the Company shall commence upon filing of these Articles of Organization with the Secretary of State of the State of Florida.

IN WITNESS WHEREOF, the undersigned certifies that he is authorized to sign this Certificate of Formation on behalf of the Company, and affirms that the statements contained herein are true under penalties of perjury, and he hereby executes these Articles of Organization on this 13th day of August, 2008.


Kenneth R. Cohen, Esq.

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