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Division of Corporations

Fax Number : (850) 617-6383

: EMPIRE CORPORATE KIT COMPANY Account Name

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## FLORIDA/FOREIGN LIMITED LIABILITY CO.

## nolan ink solutions, llc

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# ARTICLES OF ORGANIZATION OF FLORIDA LIMITED LIABILITY COMPANY

The undersigned, being authorized to execute and file these Articles, hereby certifles that:

#### ARTICLE I - Name:

The name of the Limited Liability Company is:

**NOLAN INK SOLUTIONS, LLC** 

### ARTICLE II - Address:

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

3001 South Ocean Drive, #1409 Hollywood, FL 33019

#### ARTICLE III - Duration:

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

Perpetual

# ARTICLE IV — Management: (Check the appropriate box and complete the statement)

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:

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

Timothy P. Nolan 3001 South Ocean Drive, #1409 Hollywood, FL 33019

### - 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:

reserved for the owner/manager to determine.

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### ARTICLE VI - M+embers' 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:

reserved for the remaining member(s) of this LLC to determine by unanimous consent.

IN WITNESS WHEREOF, I have signed these Articles of Organization and acknowledged them to be my act this 4<sup>th</sup> day of November, 2008.

Signature of an authorized representative of a member executing the Articles of Organization.

(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.)

Jeffrey Feinberg
Typed or printed name of signee

Prepared By: Jeffrey Feinberg, Esquire FAN# 275700 4000 Hollywood Blvd., Suite 350-N Hollywood, FL 33021 (954) 962-8889

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Form 4-17 Registered Agent/Registered Office

# 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.

The name of the Limited Liability Company is:

**NOLAN INK SOLUTIONS, LLC** 

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

Jeffrey Feinberg 4000 Hollywood Boulevard, Suite 350-N Hollywood, FL 33021

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.

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