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SECRETARY OF STATE

Office Use Only

## **COVER LETTER**

	Registration Section of Cor									
SUBJECT: N & R Brightening, LLC										
(Name of Limited Liability Company)										
The enclosed Articles of Organization and fee(s) are submitted for filing.										
Please return all correspondence concerning this matter to the following:										
Nancy Ingle										
(Name of Person)										
N & R Brightening, LLC										
(Firm/Company)										
1446 Sun Marsh Dr.										
<del></del>			(Address)							
Jacksonville, FL 32225										
(City/State and Zip Code)										
For further information concerning this matter, please call:										
Nancy Ingle at 904 613-5016										
(Name of Person)		(Area Cod	e & Daytime Te	lephone Number)						
Enclosed	is a check for	the following amount:		_	_					
<b>\$125.00</b>	Filing Fee [	\$130.00 Filing Fee & Certificate of Status	\$155.00 Filin Certified Copy (additional copy	ру	\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)					
		Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Registrati Division Clifton B 2661 Exe	ourier Addression Section of Corporation duilding ecutive Center (see, FL 32301	s					

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

N & R Brightening, LLC  (Must end with the words "Lim	nited Liability Company, "L.L.C.," or "LLC.")				
ARTICLE II - Address:					
The mailing address and street address of	of the principal office of the Limited Lial	bility Company is:			
Principal Office Address:	Mailing Address:				
1446 Sun Marsh Dr.	1446 Sun Marsh Dr.				
Jacksonville, FL 32225	Jacksonville, FL 32225				
business entity with an active Florida registration.)  The name and the Florida street address	own Registered Agent. You must designate an individual softhe registered agent are:	- <del></del> 1			
•	s of the registered agent are:				
The name and the Florida street address		98 NOV 17 SECRETARY			
The name and the Florida street address	s of the registered agent are:	98 NOV 17 SECRETARY			
The name and the Florida street address  Nancy Ingle  1446 Sun Mars	s of the registered agent are:	98 NOV 17 SECRETARY			
The name and the Florida street address  Nancy Ingle  1446 Sun Mars	Name  Sh Dr.  street address (P.O. Box NOT acceptable)	OB NOV 17 PH SECNETARY OF TALLAHASSEE F			
The name and the Florida street address  Nancy Ingle  1446 Sun Mars  Florida  Jacksonville, F	Name  Sh Dr.  street address (P.O. Box NOT acceptable)	08 NOV 17 SECRETARY			

(CONTINUED)
Page 1 of 2

Registered Agent's Signature (REQUIRED)

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" = Manag "MGRM" = Man					
	MGR		Nancy Ingle			
		_	1446 Sun Marsh Dr.			
			Jacksonville, FL 32225			
	MGRM		M. Roger Ingle			
	<del></del>	<del>-</del>	1446 Sun Marsh Dr.			
			Jacksonville, FL 32225			
		<del></del>				
		_				
				<del></del>		
	(Use attachment i	f necessary)				
A PORTE				OPTIO		
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		Signature of a member o	r an authorized representative of a member.		3	ilinand il f
		(In accordance with section of this document constitute that the facts stated here	on 608.408(3), Florida Statutes, the execution es an affirmation under the penalties of perjury in are true.)	FLORIDA	PM 12: 31	T. Control
		Nancy Ingle				
		Typec	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)