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FILEO SECRETARY OF STATE DIVISION OF CORPORATION

T. HAMPTON

DEC - 8 2008

EXAMINER

COVER LETTER

Division of Corporations	
SUBJECT: NMG Development C	ompany LLC.
	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:
Nicolas M. Guardalabene	}
	(Name of Person)
NMG Development Com	pany LLC.
	(Firm/Company)
246 San Carlos Street	
	(Address)
Nokomis, Florida 34275	
	(City/State and Zip Code)
For further information concerning this matter, p	please call:
Nicolas M. Guardalabene	at (813 789-5149
(Name of Person)	(Area Code & Daytime Telephone Number)
Enclosed is a check for the following amour	nt:
\$125.00 Filing Fee \$130.00 Filing Fee Certificate of Statu	
Mailing Address Registration Section Division of Corporati P.O. Box 6327 Tallahassee, FL 3231	Clifton Building

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:	
NMG Development Company LLC.	
(Must end with the words "Limited Liability	ty Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the pri	ncipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
Nicolas M. Guardalabene	Nicolas M. Guardalabene
246 San Carlos Street	246 San Carlos Street
Nokomis, Florida 34275	Nokomis, Florida 34275
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Register business entity with an active Florida registration.) The name and the Florida street address of the reNicolas M. Guardalat	egistered agent are:
Name	
246 San Carlos Stree	et
Florida street addr	ress (P.O. Box <u>NOT</u> acceptable)
Nokomis, Florida	FL 34275
City, State, ar	nd Zip
Having been named as registered agent and to a	ccept service of process for the above stated limited

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..

Registered Agent's Signature (REQUIRED)

(CONTINUED) Page 1 of 2 08 DEC -5 AM 10: 33

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

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

MGR	•	Nicolas M. Guardalabene 246 San Carlos Street	
		Nokomis, Florida 34275	
· · · · · · · · · · · · · · · · · · ·			
			
(Use attachment if r	necessary)		
LE V: Effective dat	e. if other than the da	ate of filing:	OPTION
fective date is listed	, the date must be	specific and cannot be more that	an five business da
days after the date	of filing.)		

(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.)

Nicolas M. Guardalabene

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)