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Florida Department of State
Division of Corporations
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FLORIDA/FOREIGN LIMITED LIABILITY CO.

NGT LLC

Certificate of Status	0
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FAX AUDIT # H090001390923

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**SECRETARY OF STATE
TALLAHASSEE FLORIDA**

**ARTICLES OF ORGANIZATION
OF
NGT LLC**

ARTICLE I NAME

The name of the limited liability company shall be: **NGT LLC**

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this Limited Liability Company shall be:
3164 Davis Road, Naples, Florida 34104.

ARTICLE III INITIAL REGISTERED AGENT & STREET ADDRESS

The name and address of the initial registered agent is: William Cleary, 3164 Davis Blvd., Naples, Florida 34104. Located in the County of Collier.

ARTICLE IV DURATION

The duration for the limited liability company shall be: Perpetual.

ARTICLE V MANAGERS/MEMBERS

The management of the limited liability company is reserved for the Members and the name and address of the member of the Limited Liability Company is:

Tera Garulay, 3164 Davis Road, Naples, Florida 34104



Date: June 4, 2009

- Business Filings Incorporated, Organizer
Mark Williams, A.V.P.

Authorized Representative

Prepared by Mark Williams, Business Filings Incorporated, 8040 Excelsior Dr., Suite 200, Madison, WI 53717

(608) 827-5300

FAX AUDIT # H090001390923

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H090001390923CERTIFICATE OF DESIGNATION OF REGISTERED
AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415, FLORIDA STATUTES, THE UNDERSIGNED COMPANY, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

The name of the limited liability company is: **NGT LLC**

The name and address of the registered agent and office is William Cleary, 3164 Davis Blvd., Naples, Florida 34104. Located in the County of Collier.

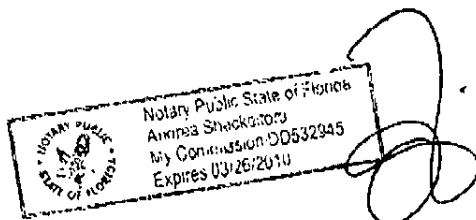
Having been named as registered agent and to accept service of process for the above stated company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Signature:

William Cleary

Date:

6/8/2009



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