

L090000069418

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

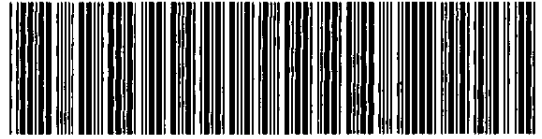
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



300158584153

07/17/09--01037--011 **155.00

FILED

09 JUL 17 PM 1:15

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

J. BRYAN

JUL 20 2009

EXAMINER

NISHIKA LLC

July 9, 2009

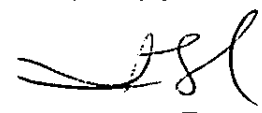
Department of State
Division of Corporations
Corporate Filings
P O Box 6327
Tallahassee, FL 32314

Dear Sir or Madam:

Enclosed is a check for \$155 to cover the formation of NISHIKA LLC

Please send the certified copy to: Irene Tzanani, 9757 SW 69th Ct. Miami, FL. 33156
Thank you for your cooperation.

Very truly yours,


Irene Tzanani

FILED
09 JUL 17 PM 1:15
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

09 JUL 17 PM 1:15

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLES OF ORGANIZATION
OF
NISHIKA LLC

Article I Name

The name of the limited liability company is: NISHIKA LLC.

Article II Principal Office

The principal place of business of this Limited Liability Company shall be: 9757 SW 69 CT. MIAMI, FL. 33156

Article III Mailing Address

The mailing address of this business 9757 SW 69 CT. MIAMI, FL. 33156

Article IV Initial Registered Agent & Street Address

The name and address of the initial registered agent is: IRENE TZANANI, 9757 SW 69 CT, MIAMI, FL 33156

Article V Duration

The duration of this Limited Liability Company shall be 12/31/2044

Article VI Managers/Members

The management of this Limited Liability Company is reserved for the member and the name and address of the members are:

IRENE TZANANI
9757 SW 69 CT
MIAMI, FL 33156

BAROCH SROR
1005 MAIN ST
DAYTONA BEACH, FL 32118

CERTIFICATE 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: NISHIKA LLC

The name and address of the registered agent and office is IRENE TZANANI, 9757 SW
69 CT. MIAMI, FL 33156

Having been named as registered agent and to accept service 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 
IRENE TZANANI

FILED
09 JUL 17 PM 1:15
SECRETARY OF STATE
TALLAHASSEE, FLORIDA