Florida Department of State

Division of Corporations Public Access System

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H090001713803)))



H090001713803ABC\$

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : CSH SERVICES, LLC Account Number : I20070000160

Phone : (800)494-3124 Fax Number : (561)455-9885

FLORIDA/FOREIGN LIMITED LIABILITY CO.

The North Port Nightmares, LLC

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$125.00

SECRETARY OF STATE DIVISION OF CORPORATION OF CORPORATION OF UNIVERSITY OF STATE OF

SELVED

28 PM 2: 03

SSEE, FLORIDA

Electronic Filing Menu

Corporate Filing Menu

Help

T. HAMPTON

JUL 2 9 2009

EXAMINER

H-090001713803

ARTICLES OF ORGANIZATION FOR A FLORIDA LIMITED LIABILITY COMPANY

In compliance with Chapter 608 and/or 621,F.S.

ARTICLE I NAME

The name of the Limited Liability Company is:

THE NORTH PORT NIGHTMARES, LLC

ARTICLE II ADDRESS

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

5443 FOXWOOD DRIVE

SARASOTA, FLORIDA 34232

REGISTERED AGENT, REGISTERED OFFICE & REGISTERED AGENT SIGNATURE

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

VIRGINIA F. SCHNAITTER

5443 FOXWOOD DRIVE

SARASOTA, FLORIDA 34232

Having been named as registered agent 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 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.

VIRGINIA F.) SCHNAITTER / Registered Agent's signature

H-090001713803

PAGE 2

THE NORTH PORT NIGHTMARES, LLC

ARTICLE IV MANAGEMENT

The Limited Liability Company is to be managed by one or more members and is, therefore, a Member Managed Company.

ARTICLE V MEMBERS (optional)

MANAGING MEMBER
VIRGINIA F. SCHNAITTER
5443 FOXWOOD DRIVE
SARASOTA, FLORIDA 34232

MANAGING MEMBER HARRY F. REIF 5443 FOXWOOD DRIVE SARASOTA, FLORIDA 34232

Signature of a member or an authorized representative of a member (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.

VIRGINIA F. SCHNAITTER

SECRETARY OF STATE DIVISION OF CORPORATIONS