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(Requesto	r's Name)
(Address)	
(Address)	
(City/State	/Zip/Phone #)
PICK-UP	WAIT MAIL
(Business	Entity Name)
(Ed3iness	Linkly Hallier
(Documen	t Number)
Certified Copies	Certificates of Status
Special Instructions to Filing C	Officer
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Office Use Only



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SEP 28 2009

EXAMINER

COVER LETTER

TO:	Registration Division of C			•
SUBJE	CCT:	Nussba	aum Enterprises LLC	>
		Name of Limit	ed Liability Company	
The end	closed Articles	of Organization and fee(s) are	submitted for filing.	
Please 1	return all corres	pondence concerning this mat	ter to the following:	
_		Rich	ard W Nussbaum	
			Name of Person	
		Nussba	um Enterprises LLC	
			Firm/Company	
		12466 (Crooked Creek Lane	
•			Address	
	•	Fort Mye	rs, Florida 33913-6729	
			ty/State and Zip Code	1 000
_		silvergra	yfox1702@yahoo.com	SEP SEP
_		E-mail address: (to be used	for future annual report notificatio	25 SSE
For fur	ther information	concerning this matter, pleas	e call:	
	Richard	W Nussbaum	at (239)	277-3988 PM 129 129 129 129 129 129 129 129 129 129
,	Name	e of Person	Area Code & Daytime	Telephone Number
Enclos	sed is a check t	for the following amount:		
/]\$125.	00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	\$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$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	Street/Courier Addr Registration Section Division of Corporat Clifton Building 2661 Executive Cent Tallahassee, FL 3230	ions ter Circle

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company i	is:			
Nussbaum Ente	erprises LLC ability Company," "L.L.C.," or "LLC.")			
ARTICLE II - Address: The mailing address and street address of the	principal office of the Limited Liability Company is:			
Principal Office Address:	Mailing Address:			
12466 Crooked Creek Lane Fort Myers, Florida 33913-6729	12466 Crooked Creek Lane Fort Myers, Florida 33913-6729			
The Limited Liability Company cannot serve as its own Rep business entity with an active Florida registration.) The name and the Florida street address of the				
Linda M N	Nussbaum Programme Program			
	ed Creek Lane O. Box NOT acceptable)			
Fort Myers, FL.33913				
City, State				
liability company at the place designated in registered agent and agree to act in this capac statutes relating to the proper and complete	o accept service of process for the above stated limited in this certificate, I hereby accept the appointment as city. I further agree to comply with the provisions of all performance of my duties, and I am familiar with and gistered agent as provided for in Chapter 608, F.S			

(CONTINUED)

Page 1 of 2

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" = Manager "MGRM" = Managing Member		
MGRM	Richard W Nussbaum	
	12466 Crooked Creek Lane	
	Fort Myers, Florida 33913-6729	
MGRM	Linda M Nussbaum	
	12466 Crooked Creek Lane	
	Fort Myers, Florida 33913-6729	
	Series Series	
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	3	
(Use attachment if necessary)		
CLE V: Effective date, if other than the o		
effective date is listed, the date must be 10 days after the date of filing.)	specific and cannot be more than five business day	ys
REQUIRED SIGNATURE: Signature of a member	or an authorized representative of a member.	
(In accordance with sect	tion 608.408(3), Florida Statutes, the execution tutes an affirmation under the penalties of perjury	
R	ichard W Nussbaum	
	ed 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)