L10000003349

(Requestor's Name) (Address) (Address)
(Address)
(Address)
(121333)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Dusiness Entry Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



900163676759

01/08/10--01015--022 **130.00

TILED
10 JAN-8 MH: 38
10 JAN-8 MH: 38

(1)

SEFECTIVE DATE

COVER LETTER

Φ.	on Section of Corporations	
SUBJECT:	Nash	n Viper Racing LLC
	· · · · · · · · · · · · · · · · · · ·	ted Liability Company
The enclosed Artic	eles of Organization and fee(s) are	submitted for filing.
Please return all co	orrespondence concerning this ma	tter to the following:
-	D	ouglas E Nash
		Name of Person
 -		Firm/Company
	169	13 Equestrian Trl
		Address
		essa, FL 33556 ty/State and Zip Code
		shsabrett@aol.com
		for future annual report notification)
For further informa	ation concerning this matter, pleas	e call:
	Doug Nash	at (813) 792-9838
),	Name of Person	Area Code & Daytime Telephone Number
Enclosed is a che	ck for the following amount:	
\$125.00 Filing F	Fee \$\sqrt{\$130.00}\$ Filing Fee & Certificate of Status	S155.00 Filing Fee & S160.00 Filing Fee, Certified Copy (additional copy is enclosed) S160.00 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 Address Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Cor	mpany is:	
Nash V	iper Racing LLC imited Liability Company," "L.L.C.," or "LLC.")	
ARTICLE II - Address:	s of the principal office of the Limited Lia	shility Company is:
The maining address and street address	s of the principal office of the Elithited Liz	ionity Company is.
Principal Office Address:	Mailing Address:	
16913 Equestrian Trl	16913 Equestrian Trl	
Odessa, FL 33556	Odessa, FL 33556	
The name and the Florida street addres	•	JAN-8
	Name	mg =
169	913 Equestrian Trl	STATE STATE
	ldress (P.O. Box <u>NOT</u> acceptable)	ŞA A
Odessa, FL	33556 _{FL}	.
C	ity, State, and Zip	
liability company at the place desig registered agent and agree to act in the statutes relating to the proper and co	nt and to accept service of process for the a mated in this certificate, I hereby accept the is capacity. I further agree to comply with mplete performance of my duties, and I am on as registered agent as provided for in Cl	e appointment as the provisions of all I familiar with and
	Danko 3. Nach	
Registered Age	ent's Signature (REQUIRED)	

(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: "MGR" = Manager "MGRM" = Managin	g Member	Name and Address:	
Douglas E Nash M		16913 Equestrian Trl Odessa, FL 33556	- -
	`		- - -
	1		-
	•		- -
	if other than the date	e of filing: 1/11/2010 (OPTIO	
days after the date of REQUIRED SIGNA	f filing.)	ecific and cannot be more than five business	uays pri
Sign	sature of a member or	an authorized representative of a member.	. 5
		13;	
of ti		n 608.408(3), Florida Statutes, the execution es an affirmation under the penalties of perjury are true.)	JAN-
of ti	this document constitute the facts stated herein a	es an affirmation under the penalties of perjury	JAN-8 AM MI

- \$ 30.00 Certified Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)