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S. HAWKES

APR 2·8 2010

EXAMINER

# **COVER LETTER**

	tration Se ion of Cor	ction porations	,		
SUBJECT: _	Neva	do Karate Arts, LLC			
		(Name of Limited	d Liability Company)		
The enclosed A	Articles of	Organization and fee(s) are so	ubmitted for filing.		
Please return a	II corresp	ondence concerning this matte	r to the following:		
	Derr	ick Nevado			
		()	Name of Person)		
	Neva	do Karate Arts, LLC			
	(Firm/Company)				
	5951	Long Cove Drive	•	_	
			(Address)		
	Jack	sonville, Florida 3	2222		
		(City	/State and Zip Code)		
For further infe	ormation	concerning this matter, please	call:		
Derrick Nevado		at (904) 860-5931 (Area Code & Daytime Telephone Number)			
(Name of Person)		(Area Code & Daytime Telephone Number)			
Enclosed is a	check fo	or the following amount:			
□ \$125.00 Fil	ing 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)	
				CHOCK # 1037	
		Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street/Courier Address Registration Section Division of Corporatio Clifton Building 2661 Executive Center Tallahassee, FL 32301	ns	

#### **ARTICLES OF ORGANIZATION**

**FOR** 

#### **NEVADO KARATE ARTS, LLC**



#### **ARTICLE I - NAME**

The name of the Limited Liability Company is:

## **NEVADO KARATE ARTS, LLC**

#### **ARTICLE II - ADDRESS**

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

### **Principal Office Address:**

5211-7 Timuquana Road Jacksonville, Florida 32210

## Mailing Address:

5951 Long Cove Drive Jacksonville, Florida 32222

# ARTICLE III - REGISTERED AGENT, REGISTERED OFFICE & REGISTERED AGENT'S SIGNATURE

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

Derrick Nevado 5951 Long Cove Drive Jacksonville, Florida 32222 Having been named as registered agent and 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 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 as provided for in Chapter 608, Florida Statutes.

Derrick Nevado Registered Agent

# **ARTICLE IV - MANAGER(S) OR MANAGING MEMBER(S)**

The name and address of each Manager of Managing Member is as follows:

Title

Name and Address

Manager

Derrick Nevado

5951 Long Cove Drive

Jacksonville, Florida 32222

Manager

Orlene Nevado

785 Oakleaf Plantation Parkway #1722

Orange Park, Florida 32065

Manager

Marilyn Nevado

5951 Long Cove Drive

Jacksonville, Florida 32222

Manager

Virgilio Nevado

5951 Long Cove Drive

Jacksonville, Florida 32222

#### **ARTICLE V - EFFECTIVE DATE**

The effective date of this corporation is the date of filing of these Articles of Organization.

# SIGNATURE OF MEMBER OF AUTHORIZED REPRESENTATIVE OF A MEMBER

In accordance with section 608.408(3), Florida Statutes, the execution this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.

in the

Orlene Nevado

4Marilyn Nevado

Virgilio Nevado