Division of Corporations Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : EMPIRE CORPORATE KIT COMPANY

Account Number: 072450003255 Phone : (305)634-3694

Fax Number : (305)633-9696

er the email address for this business entity to be used for this business entity to be used for annual report mailings. Enter only one email address please. **Enter the email address for this business entity to be used for furger

Email Address:

FLORIDA LIMITED LIABILITY CO.

nash & rana, llc

Certificate of Status	0
Certified Copy	1
Page Count	04
Estimated Charge	\$155.00

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Corporate Filing Menu

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6/10/2010

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EMPIRE CORP KIT

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06/10/2010 12:27

TO: Registration Section Division of Corporations

SUBJECT: Nash & Rana,

Name of Limited Liability Company

The enclosed Arricles of Organization and fee(s) are submitted for filling.

Please return all correspondence concerning this matter to the following:

Nash Nassar	200	2
Name of Person		
•	ÉN	KUL
Nash & Rana, LLC		
Pirm/Company .	25.55 E 25.55	0
	[1]	>
4039 NW 19 Street	-11 ft	氫
Address	52	فخ
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Lauderhill, FL 33313-7058		24
City/State and Zip Code		

ACL COM

-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

691-5111 Nash Nassar Area Code & Daytime Telephone Number Nume of Person

Enclosed is a check for the following amount:

7\$125.00 Filing Fcc

□\$130.00 Filing Fee & Certificate of Status

■\$155.00 Filling Pec & Certified Copy

□ \$160.00 Filing Fee, (additional copy is eaclosed)

Cartificate of Status & Certified Copy (additional copy is enclosed)

Medine Address
Registration Section Division of Corporations P.O. Box 6327 Tallahassoc, FL 32314

Street/Coorier Address Registration Section Division of Corporations Chiton Building 2661 Executive Center Circle Talishassee, FL 32301

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICL	ЕÏ	- Name	::
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The name of the Limited Liability Company is:

Nash & Rana, LLC

(Must and with the words "Limited Liability 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:

4039 NW 19 Street Lauderhill, FL 33313-7058 4039 NW 19 Street Lauderhill, FL 33313-7058

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: (The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business emity with an active Florida registration.)

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

Nash Nassar

Name

4039 NW 19 Street

Florida street address (P.O. Box NOT acceptable)

Lauderhill

FL 33313-7058

City, State, and Zip

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 vertificate, 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 duttes, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S.

Registered Agent's Signature (REQUIRED)

Nash Nassar

(CONTINUED)
Page 1 of 2

PAGE 03/04

EMBIRE CORP KIT

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(Use attachment if necessary)	Title:	Name and Address:
MGRM Nash Nassar	"MGR" = Manager	
South Section Sectio	"MGRM" = Managing Member	Γ .
MGRM Rana Almasri 4054 NW 61 Terrace Coral Springs, FL 33067 Coral		·
Coral Springs, FL 33067 Rana Almagri 4054 NW 61 Terrace Coral Springs, FL 33067 Coral Springs,	MGRM	Nash Nassar
Wight House attachment if necessary) LE V: Effective date, if other than the date of filing: Signature of a member of 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 and true.) Nash Nassar Typed or printed name of signce Filing Free: \$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent \$ 30,000 Certified Copy (Optional)		
(Use attachment if necessary) (Use attachment if necessary) (Use attachment if necessary) (Use attachment if necessary) (LE V: Effective date, if other than the date of filing:		Coral Springs, FL 33067
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