

L10000064152

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

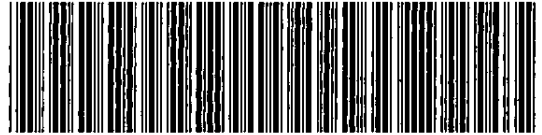
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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04/16/10--01013--024 **130.00

EFFECTIVE DATE 4/12/2010

B. KOHR

JUN 17 2010

EXAMINER

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
10 APR 16 PM 1:03



FLORIDA DEPARTMENT OF STATE
Division of Corporations

April 19, 2010

MICHELLE D. MARTIN
1360 39TH AVE. N.E.
ST. PETERSBURG, FL 33703

SUBJECT: NITRAM GROUP, L.L.C.
Ref. Number: W10000018714

EFFECTIVE DATE 4/12/2010

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
10 APR 16 PM 1:03

We have received your document for NITRAM GROUP, L.L.C. and your check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please note that we have RETAINED your \$130.00 payment.

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an administratively dissolved/revoked entity. Names of administratively dissolved/revoked entities are not available for one year from the date of administrative dissolution/revocation unless the dissolved/revoked entity provides the Department of State with an affidavit or letter stating that they have no intention of reinstating, therefore, releasing the name for use to another entity.

Adding "of Florida" or "Florida" to the end of a name is not acceptable.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6914.

Buck Kohr
Regulatory Specialist II

Letter Number: 010A00009511

EFFECTIVE DATE 4/12/2010

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
10 APR 16 PM 1:03

June 9, 2010

Ref. Number: W10000018714

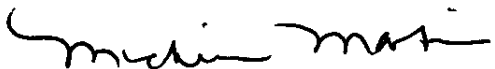
To Whom It May Concern:

Please see the attached.

Instead of filing under NITRAM GROUP, L.L.C.; we will instead file under NITRAM PARTNERS, L.L.C.

Please process and let me know if you have any questions; 727.644.6807.

Regards,



Michelle Martin

Enclosures:

Original letter from FL Dept of State

Articles of Organization

ENTER.

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: ~~NITRAM GROUP, L.L.C.~~

NITRAM PARTNERS, L.L.C.
Name of Limited Liability Company

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Michelle D. Martin

Name of Person

~~NITRAM GROUP, L.L.C.~~

NITRAM PARTNERS, L.L.C.
Firm/Company

1360 39th Ave. NE

Address

EFFECTIVE DATE

FILED STATE
DIVISION OF CORPORATIONS
10 APR 16 PM 1:03

Saint Petersburg, FL 33703

City/State and Zip Code

mmartin5@tampabay.rr.com

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

For further information concerning this matter, please call:

Michelle D. Martin

Name of Person

at (727) 644 6807

Area Code & Daytime Telephone Number

Enclosed is a check 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 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 Company is:

~~NITRAM GROUP, L.L.C.~~ NITRAM ENTERPRISES, L.L.C.

(Must end 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:

1360 39TH Ave. NE

Saint Petersburg, FL 33703

Mailing Address:

1360 39TH Ave. NE

Saint Petersburg, FL 33703

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 entity with an active Florida registration.)

EFFECTIVE DATE 4/12/2010

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

Michelle D. Martin

Name

1360 39th Ave. NE

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

Saint Petersburg

FL 33703

City, State, and Zip

FILED
DIVISION OF CORPORATIONS
10 APR 16 PM 1:03

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, F.S..

Michelle D. Martin

Registered Agent'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" = Managing Member

Name and Address:

MGRM

Michelle D. Martin

1360 39th Ave. NE

Saint Petersburg, FL 33703

MGRM

John C. Martin

1360 39th Ave. NE

Saint Petersburg, FL 33703

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: April 12, 2010. (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

REQUIRED SIGNATURE:



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.)

Michelle D. Martin

Typed 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)