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Effective Date 06/30/16



T. HAMPTON

JUL -7 2010

EXAMINER

COVER LETTER

ĭ	TO; Registration Section Division of Corporations
	SUBJECT: 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:
	Nicole Chaplin Name of Person
	NICO Media, LLC Firm/Company
	4550 NW 109 St Address
	City/State and Zip Code Oikking a bell South onet E-mail address: (to be used for future annual report notification)
	Dikking a bell south one t E-mail address: (to be used for future annual report notification)
	For further information concerning this matter, please call:
	Name of Person at (305) 439.7733 Area Code & Daytime Telephone Number
	Enclosed is a check for the following amount:
Į	□\$125.00 Filing Fee Certificate of Status □\$155.00 Filing Fee Certified Copy (additional copy is enclosed) □\$160.00 Filing Fee, Certified Copy (additional copy is enclosed)
	Mailing AddressStreet/Courier AddressRegistration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center Circle

Tallahassee, FL 32301

Effective Date 0 4 30 10

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:	
The name of the Limited Liability Company is:	:
(Must end with the words "Limited Liabi	Ity Company, "L.L.C.," or "L.L.C.")
ARTICLE II - Address:	
	rincipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
4550 NW 109 Ct Doral Fl 33178	4550 IVW 109 Ct Doral, Fl 33178
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Regist business entity with an active Florida registration.)	d Office, & Registered Agent's Signature: stered Agent. You must designate an individual or another
The name and the Florida street address of the	registered agent are:
Micole C Name	haplin
Name	ch.
4550 /Va) Florida street add	dress (P.O. Box NOT acceptable)
	FL 33/78 ate. and Zip
City, St	ate, and Zip
liability company at the place designated in t registered agent and agree to act in this capacit statutes relating to the proper and complete pe	accept service of process for the above stated limited this certificate, I hereby accept the appointment as by. I further agree to comply with the provisions of all erformance of my duties, and I am familiar with and stered agent as provided for in Chapter 608, F.S
Registered Agent's Signal	ture/(REQUIRED)
(CONT)	
Page 1	of 2

Title: "MGR" = Man		Name and Address:	
	anaging Member	Nicole Chaplin	
MGR		4550 NW pg CE	_
		Doral F1 33178	
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