

L10000078641

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

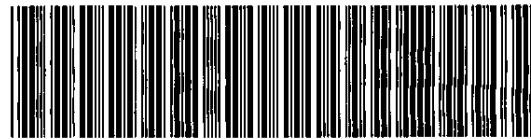
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
10 JUL 26 PM 1:58

T. HAMPTON
JUL 27 2010
EXAMINER

110-33744

COVER LETTER

TO: **Registration Section**
Division of Corporations

SUBJECT: NU LAUNCH 10 LLC
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:

Michael J. Tenorio

Name of Person

Firm/Company

2010 Old Oak Lane

Address

Safety Harbor, Florida 34695

City/State and Zip Code

stellar1@tampabay.rr.com

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

For further information concerning this matter, please call:

Michael J. Tenorio

Name of Person

at (727) 768-0744

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

RECEIVED

09 JUL 26 PM 4:00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

July 19, 2010

MICHAEL J TENORIO
2010 OLD OAK LN
SAFETY HARBOR, FL 34695

SUBJECT: NU LAUNCH 10 LLC
Ref. Number: W10000033744

We have received your document for NU LAUNCH 10 LLC and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

Section 608.407, Florida Statutes, requires the document(s) to be signed by a member or by the authorized representative of a member.

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) 245-6855.

Tammy Hampton
Regulatory Specialist II

Letter Number: 610A00017421

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

NU LAUNCH 10 LLC

(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:

MICHAEL J. TENORIO
2010 Old Oak Lane
Safety Harbor, FL 34695

Mailing Address:

Michael J. Tenorio
2010 Old Oak Lane
Safety Harbor, FL 34695

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.)

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

Michael J. Tenorio

Name

2010 Old Oak Lane

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

Safety Harbor, FL 34695

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 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..


Registered Agent's Signature (REQUIRED)

(CONTINUED)

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
JUL 26 PM 1:50

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:

MGR

Michael J. Tenorio
2010 Old Oak Lane
Safety Harbor, Fl. 34695

MGRM

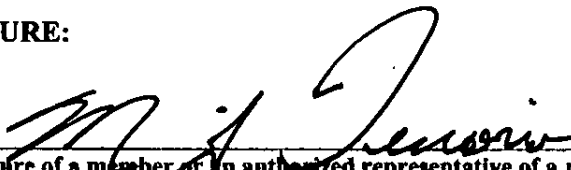
Harriette M. Tenorio
2010 Old Oak Lane
Safety Harbor, Fl. 34695

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: _____ (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.)

Michael J. Tenorio

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)

FILED
10 JUL 26 PM 1:58
SECRETARY OF STATE
DIVISION OF CORPORATIONS