

L100000109387

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

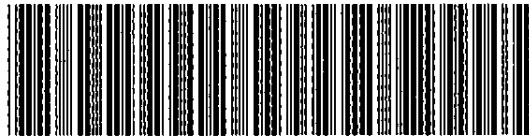
(Document Number)

Certified Copies _____

Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



300186341773

10/20/10--01002--020 **250.00

NOT INTENDED
TO ACKNOWLEDGE
SUFFICIENCY OF FILING

2010 OCT 20 AM 11:12

RECEIVED
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

10 OCT 20 PM 1:35
RECEIVED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

EFFECTIVE DATE 10/13/2010

B. KOHR

OCT 20 2010

EXAMINER

CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301
(850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

NV BY NEVADA V, LLC

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
10 OCT 20 PM 1:35

EFFECTIVE DATE 10/13/2010

☐ Art of Inc. File _____
☐ LTD Partnership File _____
☐ Foreign Corp. File _____
☒ L.C. File _____
☐ Fictitious Name File _____
☐ Trade/Service Mark _____
☐ Merger File _____
☐ Art. of Amend. File _____
☐ RA Resignation _____
☐ Dissolution / Withdrawal _____
☐ Annual Report / Reinstatement _____
☐ Cert. Copy _____
☒ Photo Copy _____
☐ Certificate of Good Standing _____
☐ Certificate of Status _____
☐ Certificate of Fictitious Name _____
☐ Corp Record Search _____
☐ Officer Search _____
☐ Fictitious Search _____
☐ Fictitious Owner Search _____
☐ Vehicle Search _____
☐ Driving Record _____
☐ UCC 1 or 3 File _____
☐ UCC 11 Search _____
☐ UCC 11 Retrieval _____
☐ Courier _____

Signature _____

Requested by: SETH

10/20/10

11:00

Name

Date

Time

Walk-In _____

Will Pick Up _____

EFFECTIVE DATE 10/13/2010

**ARTICLES OF ORGANIZATION
FOR FLORIDA LIMITED LIABILITY COMPANY**

ARTICLE I

The name of the Limited Liability Company is:

NV BY NEVADA V, LLC

ARTICLE II

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

4350 W. Cypress Street – Suite 820
Tampa, FL 33607

The mailing address of the Limited Liability Company is:

4350 W. Cypress Street – Suite 820
Tampa, FL 33607

ARTICLE III

The purpose for which this Limited Liability Company is organized is:

ANY AND ALL LAWFUL BUSINESS

ARTICLE IV

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

Kendall A. Almerico
4350 W. Cypress Street – Suite 820
Tampa, FL 33607

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 obligation of my position as registered agent.

Kendall A. Almerico
Kendall A. Almerico
Registered Agent

SECRETARY OF STATE
DIVISION OF CORPORATIONS
10 OCT 20 PM 1:35

ARTICLE V

The name and address of managing members/managers are:

Title: MGRM


Nevada Vanderford
4350 W. Cypress Street - #820
Tampa, FL 33607

ARTICLE VI

The effective date for this Limited Liability Company shall be:

October 13, 2010

Signature of member or an authorized representative of a member:



Kendall A. Almerico
Registered Agent