## L1100001453

(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



600189141886

01/05/11--01036--016 \*\*130.00

EFFECTIVE DATE 11201

B. KOHR

JAN - 6 2011

**EXAMINER** 

THE JAN -5 AN 8: LS

## **COVER LETTER**

A AND AND AND AND AND AND AND AND AND AN		COVE	CR LETTER	1
TO:	Registration Division of	n Section Corporations	EFFECTIVE DATE_	1/17/201
SUBJI	ECT. NDN	1 Services LLC		· ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' '
3030		Name of Limi	ted Liability Company	7
The en	closed Articles	s of Organization and fee(s) are	submitted for filing.	
Please	return all corre	espondence concerning this ma	tter to the following:	
	Daniel M	Mulligan		
			Name of Person	
			Firm/Company	
	1020 SV	V 98 Ave		
			Address	
!	Pembrok	e Pines, Florida, 33	025	
			ty/State and Zip Code	
	dannymul	l9@msn.com	for future annual report notification)	
D . C		•	•	
For Tur	ther intormation	on concerning this matter, pleas	se caii:	
Dani	el Mulligar	1	at ( 954 ) 2535104	
	Nan	ne of Person	Area Code & Daytime Telephone Nu	mber
Enclos	sed is a check	for the following amount:		
\$125.00	) Filing Fee	\$130.00 Filing Fee & Certificate of Status	Certified Copy Certificational copy is enclosed) Certificational copy is enclosed)	00 Filing Fee, icate of Status & ied Copy onal copy is enclosed)
		Mailing Address Registration Section	Street/Courier Address Registration Section	

Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Division of Corporations
Clifton Building
2661 Executive Center Circle Tallahassee, FL 32301

EFFECTIVE DATE 1)17 201/

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:
NDM Services 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 (

Principal Office Address:	Mailing Address:
1020 SW 98 Ave	1020 SW 98 Ave
Pembroke Pines, Florida, 33025	Pembroke Pines, Florida, 33025

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:

Daniel Mulligan
Name
1020 SW 98 Ave
Florida street address (P.O. Box NOT acceptable)
Pembroke Pines FL 33025 FL
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)

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:

MGRM	Daniel Mulligan
	1020 SW 98 Ave
	Pembroke Pines FL 33025
	· · · · · · · · · · · · · · · · · · ·
——————————————————————————————————————	
Use attachment if necessary)	
(Ose attachment it necessary)	

**REQUIRED SIGNATURE:** 

Signature of a member or an authorized representative of a member.

(In accordance with section 608.408(3), Florida Statutes, the electron of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)

Daniel Mulligan

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)