L11000021871

(Re	equestor's Name)	
(Ac	ldress)	
(Ac	ldress)	
(Ci	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Nar	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
	·	
		·

Office Use Only



400194386354

02/18/11--01011--017 **125.00

2011 FEB 18 PM 2: 42 SEURETARY OF STATE

J. SAULSBERRY EXAMINER CER 21 201

COVER LETTER

TO:	Registration S Division of Co		•	•		
SUBJ	ECT: N&B	Realty Enterprise	e, LLC			
		Name of Limite	d Liability Company			
The er	nclosed Articles of	f Organization and fee(s) are s	ubmitted for filing.			
Please	return all corresp	ondence concerning this matte	r to the following:			
	Natalia S	heps				
			Name of Person			
			Firm/Company		201 TAL	
	500 Three Islands Blvd. # 418		2011 FEB SECREIT ALLAHA	•		
	• • • •		Address		<i>γ</i> ≥	•
	Hallandale	Beach, FL 33009			8 PM	; ;
	nataliashen	City @yahoo.com	State and Zip Code		1 2: 4 STATE LORIO	1
	natanashop	E-mail address: (to be used for	r future annual report notif	ication)	Pro to	
For fu	rther information	concerning this matter, please	call:			
Nata	alia Sheps		at (754) 779	9-0008		
	Name	of Person		time Telephone Numb	er	
Enclo	sed is a check fo	or the following amount:				
]\$ 125.00	0 Filing Fee	\$130.00 Filing Fee & Certificate of Status	\$155.00 Filing Fee Certified Copy (additional copy is enc	Certificat losed) Certified	Filing Fee, te of Status & Copy copy is enclosed)	
		Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street/Courier. Registration Sec Division of Cor Clifton Building 2661 Executive Tallahassee, FL	tion porations G Center Circle		

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

N & B Realty Enterprise, LLC (Must end with the words "Limited Li	iability Company, "L.L.C.," or "LLC.")
ARTICLE II - Address:	
The mailing address and street address of the	e principal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
500 Three Islands Blvd. # 418 Hallandale Beach, FL 33009	
business entity with an active Florida registration.) The name and the Florida street address of the Natalia Sheps Na	ne registered agent are:
500 Three Islan	ias Biva. #4 18
	address (P.O. Box NOT acceptable)
Hallandale Beach	_{FL} 33009
·	, State, and Zip to accept service of process for the above stated limited
registered agent and agree to act in this capa statutes relating to the proper and complete	in this certificate, I hereby accept the appointment as acity. I further agree to comply with the provisions of all a performance of my duties, and I am familiar with and egistered agant as provided for in Chapter 608, F.S

(CONTINUED)

Registered Agent's Signature (REQUIRED)

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:

MGR	Boris Vaysman	
	15962 NW 14 PL	
	Pembroke Pines, FI 330025	
The state of the s		
		~
	125.	2011
	—————————————————————————————————————	FEB
	XAI	8 8
	E E	œ
		PH
		N
		2: 42
(Use attachment if necessary)		N
LE V: Effective date, if other that	n the date of filing: (OPTION	JAL]
	ust be specific and cannot be more than five business d	

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. 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.)

Boris Vaysman

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)