

L110000049256

(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



600201082336

04/27/11--01001--009 **125.00

RECEIVED

11 APR 26 PM 3:46

DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

B. KOHR

APR 26 2011

EXAMINER

11 APR 26 PM 4:28

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

CAPITAL CONNECTION, INC.

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

NVG, LLC

Signature _____

Requested by: SETH

04/26/11 11:00

Name

Date

Time

Walk-In _____

Will Pick Up _____

FILED
SECRETARY OF STATE
11 APR 26 PM 4:28
TALLAHASSEE, FLORIDA

____ 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 _____

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

ARTICLE I

The name of the Limited Liability Company is: NVG, LLC.

ARTICLE II

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

500 North Westshore Blvd. Suite 1015
Tampa, FL 33609

The mailing address of the Limited Liability Company is:

500 North Westshore Blvd. Suite 1015
Tampa, FL 33609

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
500 North Westshore Blvd. Suite 1015
Tampa, FL 33609

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.



Kendall A. Almerico
Registered Agent

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
11 APR 26 PM 4:28

ARTICLE V

The name and address of the managers and members are:

Title: Managers and members

Nevada Vanderford
500 N. Westshore Blvd. – Suite 1015
Tampa, FL 33609


Victor Gonzalez, Jr.
500 N. Westshore Blvd. – Suite 1015
Tampa, FL 33609

ARTICLE VI

The effective date for this Limited Liability Company shall be:

April 26, 2011

Signature of member or an authorized representative of a member:



Kendall A. Almerico
Registered Agent