11000055906

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ECRETARY OF STATE

11 MAY -9 PM 3: 30

COVER LETTER

TO:	Registration Section Division of Corporations	
SURI	ECT: NMB Capital Group,	LLC
ЭОВ		mited Liability Company
The er	nclosed Articles of Organization and fee(s) a	are submitted for filing.
Please	return all correspondence concerning this r	natter to the following:
	Brent P. Eddy	
		Name of Person
	NMB Capital Group, LLC	
		Firm/Company
	712 US HWY One, Suite	300
		Address
	North Palm Beach FL 3340	
		City/State and Zip Code
	Brent@nmbcapital.com E-mail address: (to be us	ed for future annual report notification)
For fu	rther information concerning this matter, ple	ease call:
Brer	nt P. Eddy	at (561) 951-8766
	Name of Person	Area Code & Daytime Telephone Number
Enclo	sed is a check for the following amount:	
√ \$125.0	O Filing Fee \$\int \\$130.00 Filing Fee & Certificate of Status	S155.00 Filing Fee & S160.00 Filing Fee, Certified Copy (additional copy is enclosed) \$\text{S160.00 Filing Fee,} \text{Certificate of Status & Certified Copy} \text{(additional copy is enclosed)}
	Mailing Address Registration Section Division of Corporation P.O. Box 6327 Tallahassee, FL 32314	Street/Courier Address Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301



April 27, 2011

BRENT P. EDDY 712 US HWY ONE, STE. 300 NORTH PALM BEACH, FL 33408

SUBJECT: NMB CAPITAL GROUP, LLC

Ref. Number: W11000023551

We have received your document for NMB CAPITAL GROUP, LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

A business entity may not serve as its own registered agent. Please designate an individual or another business entity with an active registration or filing with this office, having a Florida street address identical with that of the registered office.

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) 245-6967.

Letter Number: 811A00010220

Leslie Sellers Regulatory Specialist II

www.sunbiz.org

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

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The name of the Limited Liability Company is:

NMB Capital Group, 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:	Mailing Address:		
712 US HWY One	5440 N Ocean Drive		
Suite 300	PH 103		
North Palm Beach El 33408	Singer Island EL 33404		

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

BRENT P. EDDY

712 US HWY One Suite 300

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

North Palm Beach FL 33408

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

FILED

11 MAY -9 PM 3: 30

SECRETARY OF STATE
TALLAHASSEE, FI DRID.

ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

Brent P. Eddy MGR	5440 N Ocean Drive
	PH 103
	Singer Island FL 33404
	
(Use attachment if necessary)	
(· · · · · · · · · · · · · · · · · · ·	
LENG December days to advantage at	e date of filing: (OPTIO

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. 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.)

Brent P. Eddy

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)