

L12000090603

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

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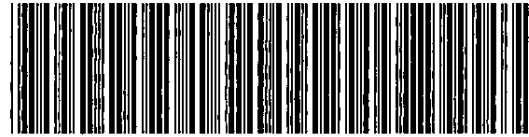
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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DIVISION OF CORPORATIONS
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T. HAMPTON

Shankman|Leone

Attorneys

July 9, 2012

Registration Section
Division of Corporations
Post Office Box 6327
Tallahassee, FL 32314

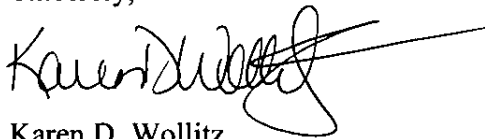
RE: Nicor USA, LLC

Dear Sir or Madam:

Enclosed are the Articles of Organization for Nicor USA, LLC, along with the \$125.00 filing fee made payable to "Florida Department of State".

Please return all correspondence concerning this matter to: **Richard Cortese, c/o Shankman Leone, P.A., 609 E. Jackson Street, Suite 100, Tampa, Florida 33602**; and should you have any questions or need any additional information, you can contact the undersigned.

Sincerely,



Karen D. Wollitz
Paralegal to the Firm

Enclosures

**ARTICLES OF ORGANIZATION FOR
LIMITED LIABILITY COMPANY**

ARTICLE I – Name:

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

ARTICLE II – Address:

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

Principal Office Address:

710 Club Drive
Palm Beach Gardens, FL 33418

Mailing Address:

710 Club Drive
Palm Beach Gardens, FL 33418

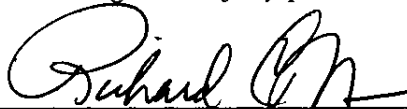
ARTICLE III – Registered Agent, Registered Office & Registered Agent's Signature:

(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:

Richard Cortese
710 Club Drive
Palm Beach Gardens, FL 33418

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)

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

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

Title:

MGR

Name and Address

Richard Cortese
710 Club Drive
Palm Beach Gardens, FL 33418

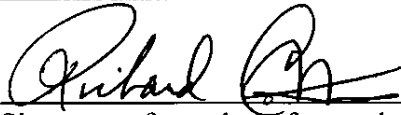
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MGRM

Nickolaus Cortese
710 Club Drive
Palm Beach Gardens, FL 33418

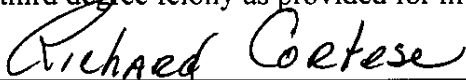
ARTICLE V: Effective date, if other than the date of filing: _____. (OPTIONAL) (If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

REQUIRED SIGNATURE:



Signature of member of 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 Section 817.155, Florida Statutes.)



Print Name

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