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SECRETARY OF STATE DIVISION OF COSPORATIONS

SEP 2 5 2012

T. HAMPTON

COVER LETTER

TO:	Registration Section Division of Corporati	ons		:
SURIE	ECT: NSLB, LLO	5.		
501502			ed Liability Company	
The en	closed Articles of Organi	zation and fee(s) are	submitted for filing.	
Please	return all correspondence	concerning this mat	ter to the following:	
	Alex Fink			
			Name of Person	
	NSLB, LLC.			
			Firm/Company	
	260 S Osceola	a Ave #1207		
			Address	
(Orlando, FL 328			
		Cit	y/State and Zip Code	
_	alex@securitiesc			
	E-ma	iil address: (to be used	for future annual report notification)	
For fur	ther information concern	ing this matter, please	e call:	
Alex			at (407) 476-2510	
	Name of Persor	1	Area Code & Daytime Telep	none Number
Enclos	sed is a check for the fo	ollowing amount:		
\$125.00		.00 Filing Fee & tificate of Status	\$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Regis Divis P.O.	ing Address stration Section sion of Corporations Box 6327 hassee, FL 32314	Street/Courier Address Registration Section Division of Corporations Clifton Building 2661 Executive Center C Tallahassee, FL 32301	ircle

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:	Employer Identification number: 46-1018140	
NSLB, LLC.		
(Must end with the words "Limited Liabilit	y Company, "L.L.C.," or "LLC.")	
ARTICLE II - Address: The mailing address and street address of the print	ncipal office of the Limited Liability Company is	s:
Principal Office Address:	Mailing Address:	
260 S Osceola Ave #1207	260 S Osceola Ave #1207	
Orlando, FL 32801	Orlando, FL 32801	
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Registe business entity with an active Florida registration.) The name and the Florida street address of the re InCorp. Services Inc. Name 17888 67th Court	red Agent. You must designate an individual or another egistered agent are:	
Florida street addr	ress (P.O. Box NOT acceptable)	
Loxahatchee	_{FL} 33470	
City, Stat	te, and Zip	
liability company at the place designated in th registered agent and agree to act in this capacity. statutes relating to the proper and complete per accept the obligations of my position as regist	ccept service of process for the above stated limited his certificate, I hereby accept the appointment as I further agree to comply with the provisions of a formance of my duties, and I am familiar with and tered agent as provided for in Chapter 608, F.S	ıll
(CONTINU	JED) Registration (SE)	כ

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 = Managing Member MGRM	"MGR" = Manag	er	Name and Address:		
(Use attachment if necessary) CLE V: Effective date, if other than the date of filing:					
(Use attachment if necessary) CLE V: Effective date, if other than the date of filing:	MGRM		Alex Fink		
(Use attachment if necessary) CLE V: Effective date, if other than the date of filing:			260 S Osceola Ave #1207		
CLE V: Effective date, if other than the date of filing:			Orlando, FL 32801		
CLE V: Effective date, if other than the date of filing:				•	
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CLE V: Effective date, if other than the date of filing:					
Clinaccordance with section 608.408(3), Florida Statutes, the execution of this document constitutes are 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.) Alex Fink Typed or printed name of signee Filing Fees: \$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent	(324 2330)	i necessary)			
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\$ 5.00 Certificate of Status (Optional)	CLE V: Effective of effective date is list to days after the date of the date	date, if other than the ced, the date must be te of filing.) GNATURE: Signature of a parable or a filing at the section 608 and affirmation under vare that any false informates a third degree felony Alex Fink Type Type Type Type Type Type Type Type Type	e specific and cannot be more than five businesses a specific and cannot be more than five businesses and authorized representative of a member. 408(3), Florida Statutes, the execution of this document the penalties of perjury that the facts stated herein are that it is a sprovided for in s.817.155, F.S.) bed or printed name of signee	true. 12 SEP 24 AM	L)