Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H12000299382 3)))



H120002993823ABC3

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page.

Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number

: (850)617~6383

from:

Account Name

: THOMAS K. BCARDMAN, P.A.

**EFFECTIVE DATE** 

Account Number : 102350003270

Phone : (2

: (239)657-4418

Fax Number

: (239)657-4278

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Zmsil	Address:
-------	----------

## FLORIDA LIMITED LIABILITY CO. NEW MARKET ACQUISITIONS, LLC

<u></u>	
Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$155.00

RECEIVED

12 DEC 21 RN 12:5
SECRETARY OF STATE
ALLAHASSEE, FLORIE

B. KO'IR

Electronic Filing Menu Corporate Filing Menu

Help

PAGE 02/04

H12000299382 3

### ARTICLES OF ORGANIZATION

OF NEW MARKET ACQUISITIONS, LLC

The undersigned member hereby certifies that the undersigned member of this organization desires to form a single member limited liability company under the laws of the State of Florida, providing for the formation, rights, privileges, and immunities of limited liability companies for profit. I further declare that the following Articles shall be the Charter and authority for the conduct of business of such limited liability company.

## CHARTER

ARTICLE I

NAME

The name of the limited liability company shall be NEW MARKET ACQUISITIONS, LLC.

## ARTICLE II

The mailing address and street address of the principal office of this limited liability company shall be 1213 Lec Street, Immokalce, Florida 34142.

#### ARTICLE III

#### DURATION

This limited liability company shall commence on January 2, 2013, and exist until January 31, 2040, unless sooner dissolved in a manner provided by law or as provided in the regulations adopted by the members.

THIS DOCUMENT PREPARED BY: Thomas K. Boardman THOMAS K. BOARDMAN, P.A. 1400 North 15th Street, Suite 201 Immokalee, Florida 34142 (239) 657-4418 Florida Bar No. 103581

H12000299382 3

## ARTICLE IV

#### MANAGEMENT

This limited liability company shall be managed by its sole member. The name and address of the managing member is as follows:

Jesus Ayala 1213 Lee Street Immokalee, Florida 34142

#### ARTICLE V

## RESTRICTIONS ON MEMBERSHIP

Members shall have the right to admit new members by majority consent. Contributions required of new members shall be determined as of the time of admission to the limited liability company.

#### ARTICLE VI

## MEMBERS' RIGHTS TO CONTINUE BUSINESS

Upon the death, retirement, resignation, expulsion, bankruptcy, or dissolution of a member, or the occurrence of any other event that terminates the continued membership of a member in the liability company, the remaining members shall have the right to continue the business upon the majority consent of such remaining members.

Executed by the undersigned at Immokalee, Florida, on December 21, 2012.

JESUS AYALA

STATE OF FLORIDA COUNTY OF COLLIER

The foregoing instrument was sworn to and acknowledged before me this 21<sup>ST</sup> day of December, 2012, by JESUS AYALA, who is apersonally known to me or who has produced \_\_\_\_\_ as identification.

KERENSA M. CLARK

Notary Public - State of Florida

My Comm. Expires Aug 14, 2016

Commission # EE 195385

Bonded Through National Holley Assn.

NOTARY PUBLIC Name: Kerensa M. Clark

H12000299382 3

# CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 607.0501 or 617.0501, FLORIDA STATUTES, THE UNDERSIGNED COMPANY, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

- 1. The name of the limited liability company is: NEW MARKET ACOUISITIONS, LLC
- 2. The name and address of the registered agent and office is:

JESUS AYALA (Name)

1213 Lee Street (P.O. Box not acceptable)

Immokalee, Florida 34142 (City/State/Zipcode)

Having been named as registered agent and to accept service of process for the above state corporation 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.

for a

H12000299382 3