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COVER LETTER

TO:	Registration Se Division of Co		•		
SUBJE	CT:	Nicholas D.	Torres LLC		
		Name of Limite	d Liability Company		
The en	closed Articles of	Organization and fee(s) are s	ubmitted for filing.		
Please	return all corresp	ondence concerning this matte	er to the following:		
	Ni	cholas Daniel To	or res Name of Person		
	N.	icholas D. Torre	s LLC		
	3	3 Comanche (•	
			Address		
	Palm	n Coast, Florida Cit	32137		
		City	y/State and Zip Code	77 60	
		torres 56766	or fluture annual report notification)	76-77	No.
					20
For fu	rther information	concerning this matter, please	call:	29 (C)	
_N	icholas Te Name	or reson	at (386) 597 - Area Code & Daytime Te	9270 sephone Number	11000000000000000000000000000000000000
Enclo	sed is a check fo	or the following amount:			
54\$ 125	.00 Filing Fee	□\$130.00 Filing Fee & Certificate of Status	□\$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	S160.00 Filing Certificate of S Certified Copy (additional copy i	Status &
		Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street/Courier Addre Registration Section Division of Corporation Clifton Building 2661 Executive Center Tallahassee, FL 32301	ons r Circle	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:	•
The name of the Limited Liability Company is:	
Nicholas D. Torres (Must end with the words "Limited Liability	LLC y Company, "L.L.C.," or "LLC.")
ARTICLE II - Address:	
The mailing address and street address of the prin	ncipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
33 Comanche Court Palm Coast, FL 32137	33 Comanche Court Palm Coast, FL 32137
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Register business entity with an active Florida registration.)	red Agent. You must designate an individual or another
The name and the Florida street address of the re-	gistered agent are:
GEORGE TOR	ASS LLC
33 Comenche Florida street addr	ess (P.O. Box <u>NOT</u> acceptable)
Polm Coost City, Stat	FL. 32/37 e, 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

"MGR" = Manager "MGRM" = Managing Member MGZ NGC 33	
MGR Nic	
	holas Torres Comanche Court Coast, FL 32137
(Use attachment if necessary)	
ARTICLE V: Effective date, if other than the date of filin (If an effective date is listed, the date must be specific prior to or 90 days offer the date of filing.)	and cannot be more than five business days
prior to or 90 days after the date of filing.)	1 2 2 C
REQUIRED SIGNATURE:	
Mate-	5
	rized representative of a member. da Statutes, the execution of this document of perjury that the facts stated herein are true. End in a document to the Department of State
Signature of a member or an autho (In accordance with section 608.408(3), Floric constitutes an affirmation under the penalties of a maware that any false information submittee.	rized representative of a member. da Statutes, the execution of this document of perjury that the facts stated herein are true. ed in a document to the Department of State or in s.817.155, F.S.)

of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)