# L13000140567

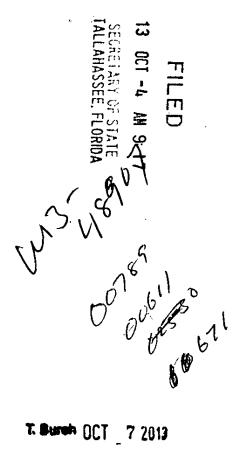
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Certified Copies	Certificate	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



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#### **COVER LETTER**

TO: **Registration Section Division of Corporations** 

NAS Ventures, LLC

Name of Limited Liability Company

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

## Nancy Stemple

Name of Person

Firm/Company

### 5906 34th Avenue W

Address

## Bradenton, FL 34209

City/State and Zip Code

nas6@verizon.net

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

## Nancy Stemple

√794-3882

Name of Person

rea Code & Daytime Telephone Number

Enclosed is a check for the following amount:

**□**\$125.00 Filing Fee

□\$130.00 Filing Fee & Certificate of Status

**2**\$155.00 Filing Fee & **Certified Copy** (additional copy is enclosed) □ \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

#### **Mailing Address**

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

#### Street/Courier Address

Registration Section **Division of Corporations** Clifton Building 2661 Executive Center Circle



September 4, 2013

NANCY STEMPLE 5906 34TH AVE W BRADENTON, FL 34209

SUBJECT: NAS VENTURES, LLC Ref. Number: W13000048907

We have received your document for NAS VENTURES, LLC and your check(s) totaling \$155.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

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) 245-6051.

Tim Burch Regulatory Specialist II

Letter Number: 913A00020823

#### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Na		
The name of the I	Limited Liability Company	is:
NAS Ventures, LLC	fust end with the words "Limited L	iability Company, "L.L.C.," or "LLC.")
ARTICLE II - A The mailing addre		e principal office of the Limited Liability Company is:
Principal Office	Address:	Mailing Address:
5906 34th Avenue W		Same as physical
Bradenton, FL 34209		
•	5906 34th Avenue W Florida street	TALLAHAS SEE, FLORING AM 99 address (P.O. Box NOT acceptable)
	Bradenton	FL 34209
liability compo registered agent all statutes rela	ned as registered agent and any at the place designated and agree to act in this capting to the proper and completing to the proper and completions of my position as	to accept service of process for the above stated limited in this certificate, I hereby accept the appointment as pacity. I further agree to comply with the provisions of plete performance of my duties, and I am familiar with a registered agent as provided for in Chapter 608, F.S

(CONTINUED)

TICLE IV- Manager(s) or Managing Member(s): e name and address of each Manager or Managing Member is as follows:

<u>Tide:</u> •"MGR" = Manager	Name and Address:
"MGRM" = Managing Mer	nber
MGR	Nancy Stemple
	5906 34th Avenue W
	Bradenton, FL 34209
	<u></u>
(Use attachment if necessary	y)
RTICLE V: Effective date, if other	er than the date of filing: (OPTIONAL)
ior to or 90 days after the date of	date must be specific and cannot be more than five business da
for to or 30 days after the date of	i mug.)
<b>REQUIRED</b> SIGNATURE	E:
<u>REQUIRED</u> SIGNATURI	E:
Manus Signature	Stemple of a member or an authorized representative of a member.
Signature of (In accordance with	Stemple of a member or an authorized representative of a member. section 608.408(3), Florida Statutes, the execution of this document
Signature of Constitutes an affirm I am aware that any	Stample of a member or an authorized representative of a member. section 608.408(3), Florida Statutes, the execution of this document nation under the penalties of perjury that the facts stated herein are true. false information submitted in a document to the Department of State
Signature of Constitutes an affirm I am aware that any	Stemple of a member or an authorized representative of a member. section 608.408(3), Florida Statutes, the execution of this document nation under the penalties of perjury that the facts stated herein are true.
Signature of Constitutes an affirm I am aware that any	Stemple of a member or an authorized representative of a member. section 608.408(3), Florida Statutes, the execution of this document nation under the penalties of perjury that the facts stated herein are true. false information submitted in a document to the Department of State egree felony as provided for in s.817.155, F.S.)

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)