Division of Corporations 3000 136 Page 1

Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850) 617-6383

From:

Account Name : PADRO AND COMPANY, P.A.

Account Number : 120050000094 Phone : (305) 500-9361

Pax Number : (305)500-9492

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

Email Address:

FLORIDA LIMITED LIABILITY CO.

N.L. Investors LLC

Certificate of Status	0
Certified Copy	1
Page Count	02
Estimated Charge	\$155.00

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Help

12/16/13

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ARTICLE I. Name:

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the l	Limited Liability Company	is:			
N.L. INVESTORS	LLC				
(1)	Aust end with the words "Limited La	shility Company, "L.L.C.," or "LLC.")			
ARTICLE II - A	ddress:				
The mailing addre	ess and street address of the	principal office of the Limited	Liability Comp	pany is:	
Principal Office	Address:	Mailing Address:			
9803 NW 10 Terr					
Miami, FL 33172					
(The Limited Liability)	Registered Agent, Register Company cannot serve as its own Re n active Florida registration.)	red Office, & Registered Agen gistered Agent. You must designate an inc	it's Signature: dividual or another	2900	
The name and the Florida street address of the registered agent are:			Œ)	:	
	Jose F. Padro		3	1214 146 146	,
Name		127			
	2520 NW 97 Ave, 120		₹ , - , \$	2	
	Florida street	address (P.O. Box NOT acceptable)			
	Miami	_{FL} 33172			
	City	, State, 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

H130002749913

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

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

	Title: "MGR" = Manager "MGRM" = Manager		Name and Address:			
0	MGRM 11		Likia Thaia Llustada Barnia			
	MGKM	-	Libia Thais Hurtado Pernia		_	
			9803 NW 10 Terr Miemi, FL 33172		_	
	_		WIEHR, 1 2 33 172	· -	-	
lt.	MGR M		Marko Lompar			
			9803 NW 10 Terr		-	
			Miami, FL 33172			
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(If an	CLE V: Effective da effective date is list o or 90 days after the REOUIRED SIGN (In accordance)	nte, if other than the ted, the date must be date of filing.) NATURE: Signature of a member dance with section 60 are an affirmation under that any false information for the that any false information in the that any false information under the than the ted, the date must be date of filing.)	st be specific and cannot be more	than five but this document there in are true	– s` ONAL) siness d	lays
(If an	CLE V: Effective da effective date is list o or 90 days after the REOUIRED SIGN (In accordance)	nte, if other than the ted, the date must be date of filing.) NATURE: Signature of a member dance with section 60 as an affirmation under that any false informs a third degree felon Marko Lompar	or an authorized representative of a magnetic states of penjury that the facts states mation submitted in a document to the Depa	than five but this document there in are true	– s` ONAL) siness d	lays

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)