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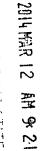
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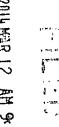


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ACCOUNT NO. : 12000000195 REFERENCE: 049985 8941A AUTHORIZATION : COST LIMIT : \$ 125 ORDER DATE: March 12, 2014 ORDER TIME : 1:08 PM ORDER NO. : 049985-005 CUSTOMER NO: 8941A DOMESTIC FILING NAME: NASS HOLDINGS, LLC EFFECTIVE DATE: ARTICLES OF INCORPORATION CERTIFICATE OF LIMITED PARTNERSHIP XX ARTICLES OF ORGANIZATION PLEASE RETURN THE FOLLOWING AS PROOF OF FILING: __ CERTIFIED COPY XX PLAIN STAMPED COPY CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Susie Knight - EXT. 52956

EXAMINER'S INITIALS:

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:	
NASS Holdings, LLC (Must end with the words "Limited L	iability Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the principal offi	ce of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
7065 Challenger Avenue Titusville, FL	7065 Challenger Avenue Titusville, FL
ARTICLE III - Registered Agent, Registered Office, & (The Limited Liability Company cannot serve as its own R another business entity with an active Florida registration.) The name and the Florida street address of the registered agency.	egistered Agent. You must designate an individual or)
Bruce D Green	
Name	
1313 South Andrews Avenue	
Florida street address (P.O. Box N	NOT acceptable)
	FL 33316
City	Zip
the place designated in this certificate, I hereby accept to capacity. I further agree to comply with the provisions of of my duties, and I am familiar with and accept the oblig	ice of process for the above stated limited liability company at he appointment as registered agent and agree to act in this all statutes relating to the proper and complete performance actions of my position as registered agent as provided for in 605, F.S
/S/ Bruce	D Green
Registered Agent's Signatur	re (REQUIRED)
(CONTINUE)	D) ~ ~ ~ ~

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Page 1 of 2

MBR" = Authorized Member GR" = Manager GR		
	Richard McCourt	
	7065 Challenger Avenue Titusville, FL	
		
		
		
attachment if necessary)		
ing.)		r to or 90
I: Other provisions, if any.		17 to or 90
<i>5</i> /		or to or 20
I: Other provisions, if any.		r to or 90
DUIRED SIGNATURE:		r to or 90
DUIRED SIGNATURE: /S/ R Signature of a member of the constitutes an affirmation under the per-	ichard McCourt r an authorized representative of a member. (1) (b), Florida Statutes, the execution of this do enalties of perjury that the facts stated herein are submitted in a document to the Department of St	cument true.
DUIRED SIGNATURE: /S/ R Signature of a member of (In accordance with section 605.0203 constitutes an affirmation under the per I am aware that any false information acconstitutes a third degree felony as pro-	ichard McCourt r an authorized representative of a member. (1) (b), Florida Statutes, the execution of this do enalties of perjury that the facts stated herein are submitted in a document to the Department of St	cument true.
DUIRED SIGNATURE: /S/ R Signature of a member of a m	ichard McCourt r an authorized representative of a member. (1) (b), Florida Statutes, the execution of this domalties of perjury that the facts stated herein are submitted in a document to the Department of Stavided for in s.817.155, F.S.)	cument true.
DUIRED SIGNATURE: /S/ R Signature of a member of a m	ichard McCourt r an authorized representative of a member. (1) (b), Florida Statutes, the execution of this doesnalties of perjury that the facts stated herein are submitted in a document to the Department of State of the fact of the Department of State of the fact of the Department of State of the fact of the Department of State of the Department of the Department of State of the Department of	cument true.

ARTICLE IV-

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