## L14000096240

(Re	questor's Name)	
(Ad	dress)	. 49-444
(Ad	dress)	
(Cit	y/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nai	me)
(Do	cument Number)	)
Certified Copies	_ Certificate	s of Status
Special Instructions to	Filing Officer:	





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SECRETARY OF STATE ALLAHASSEE, FLORIE

JUN 1 6 2014 T. BROWN

## **COVER LETTER**

<b>.</b>	TO:	Registration Section Division of Corporations			ia,	ż	
	SUBJE	ect: Nord Ta		LC ited Liability Compa	uny		
	The en	closed Articles of Organization	and fee(s) are	e submitted for filing	,		
	Please	return all correspondence conce	erning this ma	itter to the following:			
			Joyc	e M. Vol	ant		
			Ner	dTactix,	LLC		
				Firm/Company '			
		1400 E. J	Johnson	1 Ave., #1	39		
		Ponsac	ola, F	L 32514 ity/State and Zip Cod			
		JOYCO V JE-wail addres	Ci olant is: (to be used	ity/State and Zip Cod a mail. ( I for future annual rep	e Som port notificat	ion)	
	For fur	ther information concerning this					
		oyce Volant Name of Person	at (	850 <u>912</u> Area Code [	- <u>                                     </u>	> phone Number	
	Enclose	ed is a check for the following a	imount:	,			
	l \$125.0	0 Filing Fee ☐\$130.00 Fil Certificate	_	S155.00 Filing F Certified Copy (additional copy is		□\$160.00 Fili Certificate of Certified Co (additional cop	of Status &
		Mailing Address Registration Section			ourier Addre	<u>ess</u>	

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

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

, ARTICLES OF ORGANIZATION FOR FL	ORIDA LIMITED LIABILITY COMPANY.
ARTICLE I - Name: The name of the Limited Liability Company is:	ALL ALL SECOND
NerdTactix, Ll	
(Must end with the words "Limited L	Liability Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the principal off	ice of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
1400 E Johnson Ave, #139 Pensa oda, FL 32514	1400 E. Johnson Ave. #139 Pensacola, Fl 32514
ARTICLE III - Registered Agent, Registered Office, & (The Limited Liability Company cannot serve as its own R another business entity with an active Florida registration.	Legistered Agent. You must designate an individual or
The name and the Florida street address of the registered a	gent are:

1400 E. Johnson Ave. #139

Florida street address (P.O. Box NOT acceptable)

Pensacola FL 32514

City 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 605, F.S.

Registered Agest's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

itle:	Name and Address:
MBR" = Authorized Member IGR" = Manager	
MGR	Joyce Volant
	Pensacola, FL 32514
	Pensacola, FL 32514
V: Effective date, if other than the dive date is listed, the date must be	ate of filing:
Use attachment if necessary)  V: Effective date, if other than the dative date is listed, the date must be filing.)  VI: Other provisions, if any.	ate of filing:
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Page 2 of 2