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(Re	equestor's Name)	
(Ad	ldress)	
(Ád	dress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
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Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	i

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COVER LETTER

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TO:	Registration S Division of Co				
SUBJE		TY HOLDINGS, LI	LC		
3000		Name	of Limited Liab	ility Company	
The end	closed Articles of	f Organization and fe	e(s) are submitte	ed for filing.	
Please i	return all corresp	ondence concerning	this matter to the	e following:	
	Leland S. Sa	alomon			
	 		Name	of Person	
	NB Realty I	Holdings, LLC			
	· · ·		Firm/C	Company	
	6437 North	Bay Rd			
			Ad	dress	
	Miami Beac	ch, Florida, 33141			
	1.0.1.0.1.6.1	370	City/State	and Zip Code	
		37@gmail.com E-mail address: (to b	ne used for future	annual report notificat	ion)
For furth		oncerning this matter		·	
٠	Leland Salor	mon	786 at (256-6963	
	Nan	ne of Person	Area Code	Daytime Telephor	ne Number
Enclose	ed is a check for t	the following amoun	t:		
\$125.0	0 Filing Fee	\$130.00 Filing Fe Certificate of Sta	tus Cert	5.00 Filing Fee & ified Copy onal copy is enclosed)	\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed
		ng Address		Street Address	
	Divisi	on of Corporations Sox 6327		Registration Section Division of Corporat Clifton Building	ions

Tallahassee, FL 32314

2661 Executive Center Circle

Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

	HOLDINGS, LLC			
(Mı	ist end with the words "Limited	l Liability Company	y, "L.L.C.," or "LLC.")	
ARTICLE II - Address: The mailing address and	street address of the principal o	ffice of the Limited	Liability Company is:	
<u> </u>	rincipal Office Address:		Mailing Address:	
6437 North B		6437	7 North Bay Road	
Miami Beach	, FL 33141	Mia	mi Beach, FL 33141	
The name and the Florida	rith an active Florida registration street address of the registered Leland Salomon	agent are:		2018
The name and the Florida	street address of the registered	ŕ		STORE WAY
The name and the Fiorida	Leland Salomon 6437 North Bay Rd	l agent are:		310387738 61 AVA 1187
The name and the Fiorida	Leland Salomon 6437 North Bay Rd Florida street address	l agent are:		2015 HAY 19 A
The name and the Florida	Leland Salomon 6437 North Bay Rd	Name s (P.O. Box NOT a	cceptable) 33141AMBJ Zip	19

Page 1 of 2

(CONTINUED)

"MBR" = Authorized Member "MGR" = Manager AMBR Leland Salomon 6437 North Bay Rd Miami Beach, FL 33141 MGR Leland Salomon 6437 North Bay Rd Miami Beach, FL 33141 Leland Salomon 6437 North Bay Rd Miami Beach, FL 33141 (Use attachment if necessary) E V: Effective date, if other than the date of filing: (Use attachment if necessary) the date is listed, the date must be specific and cannot be more than five business days prior to or filing.) the date inserted in this block does not meet the applicable statutory filing requirements, this date will rement's effective date on the Department of State's records. E VI: Other provisions, if any. REOUIRED SIGNATURE: Signature of a pember of the department of State information submitted in a document to the Department of State constitutes an affirmation under the penalties of perjury that the facts stated herein are train any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.) Leland S. Salomon Typed or printed name of signee	MGR" = Manager	
AMBR Leland Salomon 6437 North Bay Rd Miami Beach, FL 33141 Leland Salomon 6437 North Bay Rd Miami Beach, FL 33141 Leland Salomon 6437 North Bay Rd Miami Beach, FL 33141 (OPTIONAL) ctive date, if other than the date of filing:		
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