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(Re	questor's Name)	
(Ad	dress)	
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(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	



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12/16/15--01007--015 **125.00

SECRETARY OF STATE
SHOWN OF CORPORATION

Office Use Only

- 12/29/15

COVER LETTER

Division of Corporations	
;	
SUBJECT: NuTrish Consulting 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:	
Patricia Sganga Name of Person	
NuTrish Consulting LLC Firm/Company	
6732 Woodlake Drive, Apt 322 Address	
Addiess	
Orlando, FL 32810	
City/State and Zip Code	
Patriciasganga@gmail.com E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	
Patricia Sganga at (914) 462 - 2205 Name of Person Area Code Daytime Telephone Number	
Enclosed is a check for the following amount:	
☐ \$125.00 Filing Fee Certificate of Status Certificate of Status Certificate of Status Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)	ed)

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
Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:	
NuTrish Consulting LLC	
(Must end with the words "Limit	ed Liability Company, "L.L.C.," or "LLC.")
ARTICLE 11 - Address: The mailing address and street address of the principal	office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
6732 Woodlake Drive. Apt 322 Orlando, FL 32810	6732 Woodlake Drive, Apt 322 Orlando, FL 32810
ARTICLE III - Registered Agent, Registered Office (The Limited Liability Company cannot serve as its own another business entity with an active Florida registrate.) The name and the Florida street address of the register.	vn Registered Agent. You must designate an individual or ion.)
·	
<u>Patricia Sganga</u> Nar	ne
6732 Woodlake Drive, Apt Florida street address (P.O. B	
Orlando	FL 32810
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..

Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

"MGR" = Manager MGR	<u>Title:</u>	Name and Address:
Patricia Sganga 6732 Woodlake Drive, Apt 322 Orlando, FL 32810 CUse attachment if necessary) E.V: Effective date, if other than the date of filing: Cive date is listed, the date must be specific and cannot be more than five business days prior to or 90 filing.) E.VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a member of an authorized representative of a member. (In accordance with section 605.0293-(7)(b). Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. I am aware that 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.) Patricia Sganga Typed or printed name of signce Filing Fees: \$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent	"AMBR" = Authorized Member	
(Use attachment if necessary) E. V: Effective date, if other than the date of filing:	"MGR" = Manager	
Orlando, FL 32810 [Use attachment if necessary) E. V: Effective date, if other than the date of filing:	MGR	
(Use attachment if necessary) E. V: Effective date, if other than the date of filing:		6732 Woodlake Drive, Apt 322
EV: Effective date, if other than the date of filling:		Orlando, FL 32810
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ARTICLE IV-

Page 2 of 2

\$ 5.00 Certificate of Status (Optional)

NuTrish Consulting LLC 6732 Woodlake Drive, Apt 322 Orlando, FL

INITIAL LIST OF MEMBERS

The following named person(s) shall constitute the initial members of NuTrish Consulting LLC:

Patricia Sganga 6732 Woodlake Drive, Apt 322 Orlando, FL 32810

Patricia Sganga, Organizer

12/5/15 Date