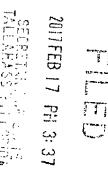
L1700030012

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



500295480595





C. GOLDEN FEB 1 7 2017

FLORIDA FILING & SEARCH SERVICES, INC.

P.O. BOX 10662 TALLAHASSEE, FL 32302

155 Office Plaza Dr Ste A Tallahassee FL 32301

PHONE: (800) 435-9371; FAX: (866) 860-8395

DATE:

2/17/17

NAME:

NUWAII HOLDINGS LLC

TYPE OF FILING: ARTICLES

COST:

125.00

RETURN: PLAIN COPY PLEASE

ACCOUNT: FCA00000015

AUTHORIZATION: ABBIE/PAUL HODGE

FILED

ARTICLES OF ORGANIZATION FOR A 2017 FEB 17 PM 3: 37 FLORIDA LIMITED LIABILITY COMPANY SECRETARY SET TALLAHAS SEE, FLORIDA

ARTICLE I NAME

The name of the Limited Liability Company is: NUWAII HOLDINGS LLC

ARTICLE II ADDRESS

The principal address of the Limited Liability Company is: 3630 AVENUE H W
WEST PALM BEACH, FLORIDA 33404

The mailing address of the Limited Liability Company is: 3900 CROWN ROAD SW #162611 ATLANTA, GEORGIA 30321

ARTICLE III REGISTERED AGENT

The name and the Florida street address of the registered agent are: LAZERRICK LAWRENCE
3630 AVENUE H W
WEST PALM BEACH, FLORIDA 33404

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.

X ALAN RENEE / Registered Agent's signature

PAGE 2 NUWAII HOLDINGS LLC

2017 FEB 17 PH 3: 37

SECRET TALLAHAO (FÉ.) LOTIDA

ARTICLE IV AUTHORIZED PERSON(S)

The name and address of each person authorized to manage and control the Limited Liability Company:

AUTHORIZED MEMBER ROSE MARIE DRADI 888 KAPIOLANI BOULEVARD #3507 HONOLULU, HAWAII 96813

AUTHORIZED MEMBER
LAZERRICK LAWRENCE
3900 CROWN ROAD SW #162611
ATLANTA, GEORGIA 30321

AZERRICK LAWKENCE / Authorized Representative s/signature

(In accordance with section 605.0203 (1) (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.)