Florida Department of State

Division of Corporations **Electronic Filing Cover Sheet**

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To:

Division of Corporations

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Account Number : FCA000000023 : (512)418-6949 Fax Number : (954)208-0845

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FLORIDA LIMITED LIABILITY CO. NBG, LLC

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Corporate Filing Menu

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To

COVER LETTER

	New Filing Section Division of Corporations	·		
SUBJEC	NBG, LLC			
00000		imited Liability Company		
The encl	osed Articles of Organization and feo(s):	are submitted for filing.		
Please re	turn all correspondence concerning this r	natter to the following:		
	Dennis B. Angers		_	
		Name of Person		
	Baker & Hostetler LLP		_	
		Firm/Company	-	-
	Key Tower - 127 Public Square, Suite	e 2000	_	
		Address	_	
	Cleveland, OH 44114			
		City/State and Zip Code	_	
	dangers@bakerlaw.com	d for future annual report notification)		
			2017 DCT -1	_
For further	information concerning this matter, plea	eo call:	C	11
	Dennis B. Angers	216 861-7081		
	Name of Person	Area Code Daytime Telephone Number	PR	i)
Enclosed	is a check for the following amount:		ž Č [†]	7
\$125.00	Filing Fee \$130.00 Filing Fee & Certificate of Status	\$155.00 Filing Fee & S160.00 Filing Fee, Certificate of Status (Certificate Copy (additional copy is enclosed)	&	
	Mailing Address New Filing Section Division of Corporations B.O. Boy 637	Street Address New Filing Section Division of Corporations Clifton Building	·	

P.O. Box 6327 Tallahassee, FL 32314

Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

NBG, LLC	 		
(Must contain the words "Limited Li	iability Company, "I	L.L.C.," or "LLC.")	
ARTICLE II - Address: The mailing address and street address of the principal off	ice of the Limited L	iability Company is:	
Principal Office Address:		Mailing Address:	
5663 Baltusrol, #3B	Same		_
Sanibel, FL 33957			
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 a	legisterod Agent. Yo	s Signature: ou must designate an individual c	or
_			
C T Corporation System	m Name		
1000 Court Dive Teles	d Daniel		
1200 South Pine Islan Florida street address (eptable)	
Plantation,	Florida	33324	
City	State	Zip	•
By: Register	ntment as registered nting to the proper w registered agent as tiga-Şyşterp J	agent and agree to act in this cap nd complete performance of my d provided for in Chapter 605, F.S. arnes Halpin Istant Secretary	pacity. I Substitute Section 1997

ARTICLE IV-

		Name and Address:
	thorized Member	
"MGR" - Man	D	
<u>MGR</u>		Gary Oatcy
		5663 Baltusrol, #3B
		Sanibol, FL 33957
	•	<u> </u>
` EV: Listective ective date is lis f filing.)	date, if other than the date o	f filing: (OPTIONAL) ific and cannot be more than five business days prior to or 90 days after
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