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C RICO

COVER LETTER

TO: Registration Division of	n Section Corporations		
SUBJECT: Nasqo	Enterprises LLC Name of Lin	mited Liability Company	
The enclosed Articles	s of Organization and fee(s) a	are submitted for filing.	
Please return all corre	espondence concerning this m	natter to the following:	
Bryan B	runo		
		Name of Person	
		Firm/Company	
2960 <u>\$V</u>	V 143rd PL RD		
		Address	
Ocala, F		21(C)	<u></u>
bryanbruno98@	⊋omail com	City/State and Zip Code ed for future annual report notifica	ntion)
For further information	on concerning this matter, ple	ase call:	' ैं न्यू ए
Bryan Bruno Nar	ne of Person	786) 606-5076 Area Code Daytime Tel	lephone Number
Enclosed is a check for	or the following amount:		
□ \$125.00 Filing Fee	✓\$130.00 Filing Fee & Certificate of Status	□\$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐\$160.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)
<u>Ma</u>	iling Address	Street/Courier Addi	ress

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

AKTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:	
The name of the Limited Liability Company is:	
None Esternises II C	
Nasqo Enterprises LLC	ed Liability Company, "L.L.C.," or "LLC.")
(Must end with the words 1.1111116	a Liability Company. E.L.C., Or T.L.C.)
ARTICLE II - Address:	
The mailing address and street address of the principal	office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
0000 014/440 1 01 00	0000 014 440 4 54 55
2960 SW 143rd PL RD Ocala, FL 34473	2960 SW 143rd PL RD Ocala, FL 34473
Oudid, FL 39473	Ocala, FL 34473
ARTICLE III - Registered Agent, Registered Office	, & Registered Agent's Signature:
(The Limited Liability Company cannot serve as its ow	n Registered Agent. You must designate an individual or
another business entity with an active Florida registrati	ion.)
The name and the Florida street address of the registere	d agent are:
Bryan Bruno	
Nam Nam	ie.
- 	•
2960 SW 143rd PL RD	
Florida street address (P.O. Bo	ox NOT acceptable)
<u>Ocala</u>	FI. 34473
City	Zip
Having have named as registered quest and to accent	service of process for the above stated limited liability company at
	ept the appointment as registered agent and agree to act in this
capacity. I further agree to comply with the provision	s of all statutes relating to the proper and complete performance
of my duties, and I am familiar with and accept the o	bligations of my position as registered agent as provided for in
	pter 605, F.S.
h \mathcal{D}	
16 1100 16.	11/100
is your the	N TOW
Registated Agent's Sign	nature (REQUIRED)

(CONTINUED)

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<u>'itle:</u>	Name and Address:
AMBR" = Authorized Member MGR" = Manager	
AMBR	Bryan Bruno
	2960 SW 143rd PL RD
	Ocala, FL 34473
	
<u> </u>	
	<u></u>
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Use attachment if necessary)	
Use attachment if necessary) V: Effective date, if other than the date of	of filing: (OPTIONAL)
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\$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)