

L18000204414

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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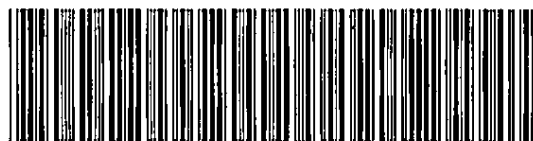
(Business Entity Name)

(Document Number)

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AUG 28 2018

18 AUG 27 AM 10:12

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COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: NSCP Aviation 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:

James M. Morton, Jr.

Name of Person

Anspach Meeks Ellenberger LLP

Firm/Company

300 Madison Ave., Suite 1600

Address

Toledo, Ohio 43604

City/State and Zip Code

Pormond@hcr-manorcare.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

James M. Morton, Jr.

419

246-5757

at ()

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for 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)

Mailing Address

New Filing Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address

New Filing Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

NSCP Aviation LLC

(Must contain the words "Limited Liability Company, "L.L.C.," or "LLC.")

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:

95047 San Remo Drive #2A

Fernandina Beach, FL

32034

Mailing Address:

95047 San Remo Drive #2A

Fernandina Beach, FL

32034

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

The name and the Florida street address of the registered agent are:

Paul A. Ormond

Name

95047 San Remo Drive #2A

Florida street address (P.O. Box **NOT** acceptable)

Fernandina Beach

Florida

32034

City

State

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..

Paul A. Ormond

Registered Agent's Signature (REQUIRED)

(CONTINUED)

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NOTARY PUBLIC
FLORIDA

ARTICLE IV-

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

Title:

"AMBR" = Authorized Member

"MGR" = Manager

AMBR

Name and Address:

Paul A. Ormond, Trustee of the Paul A. Ormond Revocable Trust Agreement
95047 San Remo Drive #2A dated 12/16/1992.
Fernandina Beach, FL 32034 as subsequently amended

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: _____ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

ARTICLE VI: Other provisions, if any.

REQUIRED SIGNATURE:

Paul A. Ormond, Trustee

Signature of a member or an authorized representative of a member.

This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes.
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.

Paul A. Ormond, Trustee of the Paul A. Ormond Revocable Trust Agreement dated 12/16/1992.
Typed or printed name of signee as subsequently amended

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)

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