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Florida Department of State
Division of Corporations
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**FLORIDA LIMITED LIABILITY CO.
Nesser Engineering Consulting, LLC**

Certificate of Status	0
Certified Copy	1
Page Count	01
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October 17, 2018

FASTKIT

FLORIDA DEPARTMENT OF STATE
Division of Corporations

SUBJECT: NESSER ENGINEERING CONSULTING, LLC
REF: W18000090040

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

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Neysa Culligan
Regulatory Specialist II

FAX Aud. #: H18000300114
Letter Number: 818A00021176

ARTICLES OF ORIGATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I NAME

The name of the Limited Liability Company is: **Nesser Engineering Consulting, LLC**

ARTICLE II PHYSICAL AND MAILING OFFICE ADDRESS

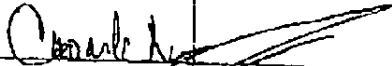
The physical place of business and mailing address is:

Physical Address:
5106 Savona Run
Bradenton FL 34211

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

The name and Florida Street address of the initial registered agent is: Chowki Nesser
5106 Savona Run
Bradenton FL 34211

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/Registered Agent

10/15/18

Date

ARTICLE IV Manager(s)

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

Chowki Nesser
5106 Savona Run
Bradenton FL 34211

Engineering Consulting

ARTICLE V BUSINESS PURPOSE

ARTICLE VI EFFECTIVE DATE

The effective date of this filing:

Immediately upon filing

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



Signature/Authorized Representative

CHOWKI H. NESSER

Printed name of Signer

10/15/18

Date

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TALLAHASSEE, FL

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