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)(CT:					
	N:	ame of Limited Liability Company				
encl	losed Articles of Organization an	d fee(s) are submitted for filing.				
ase re	eturn all correspondence concern	ing this matter to the following:				
	Dan Gross					
		Name of Person				
	DAN GROSS NP CNS LLC					
	Firm/Company					
	156 Cabot Street Suite 2B					
		Address				
	Beverly, MA 01915					
	***************************************	City/State and Zip Code				
	dangross@gmail.com					
	E-mail address: (to be used for future annual report notification)				
r furthe	r information concerning this ma	uter, please call:				
	Dan Gross	617 905-4321				
	Name of Person	Area Code Daytime Telephone Number				

Mailing Address

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

Street Address

(additional copy is enclosed)

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

Certified Copy

(additional copy is enclosed)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

(Must c	CNS LLC			
	contain the words "Limited	Liability Company, "	L.L.C" or "LLC.")	
ARTICLE II - Address: The mailing address and street	et address of the principal o	flice of the Limited L	liability Company is:	
<u>Prin</u>	cipal Office Address:		<u>Mailing Address</u>	<u>s</u> :
156 Cabot Street	Suite 2B	SAMI	<u> </u>	
Beverly, MA 019	915			
(The Limited Liability Comp another business entity with		Registered Agent, Yo		vidual or
(The Limited Liability Comp	any cannot serve as its own an active Florida registratio	Registered Agent. Yon.) I agent are:		7idual or TALLAHA
(The Limited Liability Comp another business entity with	any cannot serve as its own an active Florida registratio eet address of the registered William Gross	Registered Agent. Yon.) Lagent are: Name		18 NOV -
(The Limited Liability Comp another business entity with	oany cannot serve as its own an active Florida registratio eet address of the registered William Gross 5906 Crystal Shores	Registered Agent. Yon.) Lagent are: Name	ou must designate an indiv	18 NOV -
(The Limited Liability Comp another business entity with	oany cannot serve as its own an active Florida registratio eet address of the registered William Gross 5906 Crystal Shores	Registered Agent. Yon.) Lagent are: Name Dr. #306	ou must designate an indiv	18 NOV -7

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

Title:	Name and Address:
"AMBR" = Authorized Member "MGR" = Manager MGR	Dan Gross
	156 Cabot Street Suite 2B Beverly, MA 01915
	Beverty, MA 01913
	
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ate of filing.) : If the date inserted in this block does not n ocument's effective date on the Department	neet the applicable statutory filing requirements, this date will not be list of State's records.
CLE VI: Other provisions, if any.	
REQUIRED SIGNATURE:	in Gay
This document is execut I am aware that any falso	ember or an authorized representative of a member. ted in accordance with section 605.0203 (1) (b), Florida Statutes, information submitted in a document to the Department of State e felony as provided for in s.817.155, F.S.
Dan Gross	
	Typed or printed name of signee

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)