

**LA00012568**

Florida Department of State

Division of Corporations

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**To:**

Division of Corporations  
Fax Number : (850) 617-6381

**From:**

Account Name : SUPERBIZ.COM, INC.  
Account Number : I20070000160  
Phone : (800) 494-3124  
Fax Number : (305) 675-2811

**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\***

**Email Address:** \_\_\_\_\_**FLORIDA LIMITED LIABILITY CO.****NIFF LLC**

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2019 MAY 15 AM 9:58

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TALLAHASSEE, FL

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**ARTICLES OF ORGANIZATION FOR A FLORIDA LIMITED  
LIABILITY COMPANY**

**ARTICLE I: NAME**

The name of the Limited Liability Company is:

Niff LLC

**ARTICLE II: Address**

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

723 NE 4th Ave

Fort Lauderdale, FL 33304

**ARTICLE III: REGISTERED AGENT, REGISTERED OFFICE & REGISTERED  
AGENT SIGNATURE**

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

Jonathan Nelson

723 NE 4th Ave

Fort Lauderdale, FL 33304

Having been named as registered agent 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.

X / s / Jonathan Nelson

Jonathan Nelson

/ Registered Agent's Signature

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*Jonathan Nelson*

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

AMBR = AUTHORIZED MEMBER MGR = MANAGER

AMBR: Jonathan Nelson

723 NE 4th Ave

Fort Lauderdale, FL 33304

ARTICLE V: ANY OTHER PROVISION OR PURPOSE OF THE LIMITED LIABILITY COMPANY

X / s / Jonathan Nelson

Jonathan Nelson

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.)

*Jonathan Nelson*

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