Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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Division of Corporations

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FLORIDA LIMITED LIABILITY CO.

NOMELO LLC

Certificate of Status	0			
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Page Count	04			
Estimated Charge	\$155.00			

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Corporate Filing Menu

Help

To:

*Articles of Organization

State of Florida Limited Liability Company Pursuant to Section 605.0201, Fla.

Stat.:

Article I - NAME

The name of the Limited Liability Company is as follows: NOMELO LLC ---

Article II - TYPE

The entity being formed is a Limited Liability Company.

Article III - ADDRESS

The street address (principal office address) for the Limited Liability Company are as follows:

Limited Liability Company Address:

5300 W HILLSBORO BLVD, STE 218 COCONUT CREEK, FL 33073

The mailing address for the limited liability company are the same.

Article IV - REGISTERED AGENT INFORMATION

The name and address of the registered agent are as follows:

Shaban Malik

9000 NW 44th Street, Suite 204

Sunrise, FL 33351

The street address and the mailing address of the registered agent are the same.

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.



Erika Patino, hereby accepts the appointment as registered agent and consent 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 of the Florida Statutes.

Short Man

Signature of Registered Agent

Article V - STRUCTURE

This limited liability will have the following members and be member-managed:

ZIAD DJAROUEH

COCONUT CREEK, FL 33073

Member-Manager

Article VI - EFFECTIVE DATE

The effective date of these Articles of Organization will be the date this document is filed with the Florida Division of Corporations.

EXECUTION

Signature of organizer:

Short Miss

Printed name of organizer:

SHABAN MALIK

SECRETANY OF STATE
JALLAHASSEE, FLORIDA

25 PHI2:

To:

- - Statement of signatory:

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.