

9/6/22, 11:15 AM

Division of Corporations

L22000383705

Florida Department of State
Division of Corporations
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**FLORIDA LIMITED LIABILITY CO.
NEXUS CORE TECHNOLOGIES LLC**

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$155.00

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

NEXUS CORE TECHNOLOGIES LLC

(Must end with the words "Limited Liability Company," "Limited Company," or their abbreviation "LLC," or "L.C.,")

ARTICLE II - Address:

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

Principal Office Address:

1712 SW 2 AVE UNIT 303
MIAMI, FLORIDA 33129

Mailing Address:

1712 SW 2 AVE UNIT 303
MIAMI, FLORIDA 33129

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:

SAHIL SETHI

Name

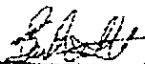
1712 SW 2 AVE UNIT 303

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

MIAMI, FLORIDA 33129

City, State, and 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.



Registered Agent's Signature (REQUIRED)

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STATE OF FLORIDA
COUNTY OF MIAMI

ARTICLE IV- Manager(s) or Managing Member(s):
The name and address of each Manager or Managing Member is as follows:

Title:

"MGR" = Manager

"ACRM" = Authorized Member

Name and Address:

AMBR

SAHIL SETHI
1712 SW 2 AVE UNIT 303
MIAMI, FLORIDA 33129

AMBR

NATHAN L. BIRSBEIN
1712 SW 2 AVE UNIT 303
MIAMI, FLORIDA 33129

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.)

ARTICLE VI: Other provisions, if Any:

None

REQUIRED SIGNATURE:


Signature of a member or an authorized representative of a member.
In accordance with section 605.0203(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.

SAHIL SETHI

Typed or printed name of signer

2022 SEP -6 AM 6:38
DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

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