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From:

Account Name : ACCOUNTING HEART LLC

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: (954)673-6545

Fax Number

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## FLORIDA LIMITED LIABILITY CO. **NUIL HOLDING LLC**

Certificate of Status 0 Certified Copy 0 Page Count 03 Estimated Charge \$125.00

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

#### ARTICLE I - Name:

The name of the Limited Liability Company is: (Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")

#### **NUIL HOLDING LLC**

### **ARTICLE II - Address:**

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

17121 COLLINS AVENUE **UNIT 3404** SUNNY ISLES, FL. US 33160

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## ARTICLE III - Registered Agent, Registered Office:

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

MILKO GRBIC 17121 COLLINS AVENUE **UNIT 3404** SUNNY ISLES, FL. 33160

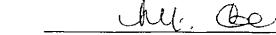
#### **ARTICLE IV-**

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

Title: MGR MILKO GRBIC 17121 COLLINS AVENUE UNIT 3404 SUNNY ISLES, FL. 33160 US

Title: MGR DANIELA ANCELOVICI 17121 COLLINS AVENUE **UNIT 3404** SUNNY ISLES, FL. US 33160

### Required Signatures:



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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.



Typed or printed name of signee

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)