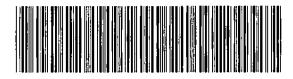
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CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301

Phone: 850-558-1500 ACCOUNT NO. : I2000000195 REFERENCE: 304152 7287682 AUTHORIZATION : COST LIMIT : \$ 160.00 ORDER DATE : January 3, 2023 ORDER TIME : 9:05 AM ORDER NO. : 304152-005 CUSTOMER NO: 7287682 DOMESTIC FILING NAME: NC FRONTIER INVESTMENTS LLC EFFECTIVE DATE: \_\_\_ ARTICLES OF INCORPORATION \_\_\_ CERTIFICATE OF LIMITED PARTNERSHIP XX ARTICLES OF ORGANIZATION PLEASE RETURN THE FOLLOWING AS PROOF OF FILING: XX CERTIFIED COPY \_\_\_\_ PLAIN STAMPED COPY \_\_\_\_ CERTIFICATE OF GOOD STANDING CONTACT PERSON: Alexxis Weiland - EXT.

EXAMINER'S INITIALS:

# COVER LETTER

TO: New Filing Section Division of Corporations
NC Frontier Investments LLC
Name of Limited Liability Company
The enclosed Articles of Organization and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Nicholas Colucia
Firm/Company
4761 West Bay Blvd #1805
Estero FL 33928  City/State and Zip Code  N7235@AOL. COM
City/State and Zip Code  N7235@A0L.COM
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Richard J. Shea, Jr., Esq. 860 493-2230
Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
□\$125.00 Filing Fee  □\$130.00 Filing Fee & □\$155.00 Filing Fee & Certificate of Status  □\$155.00 Filing Fee & Certificate of Status & Certified Copy (additional copy is enclosed)  □\$125.00 Filing Fee & Certified Copy (additional copy is enclosed)

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

Street Address New Filing Section Division The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

NC Front	ier Investments LL	C			
(Must contain	the words "Limited Li	iability Company,	"L.L.C.," or "LLC.")	_	
ARTICLE II - Address: The mailing address and street add	ress of the principal off	ice of the Limited	Liability Company is:		
<u>Principal</u>	Office Address:		Mailing Address:		
4761 West Bay Blvd :	1805	L	1761 West Bay Blud	#1800	5
Estero, FL 33928		E	SHOOFL 3392	0.0	
ARTICLE III - Registered Agent				_ <i>D</i> 	
	nnot serve as its own Rive Florida registration.	Registered Agent.	nt's Signature: You must designate an individual or	23 JA	
(The Limited Liability Company ca another business entity with an acti	nnot serve as its own Rive Florida registration.	Registered Agent.  )  agent are:	You must designate an individual or	23 JAN	
(The Limited Liability Company ca another business entity with an acti	nnot serve as its own R ive Florida registration. dress of the registered a CORPORATION SI	Registered Agent.  )  agent are:	You must designate an individual or	3 JAN -4	
(The Limited Liability Company ca another business entity with an acti	nnot serve as its own R ive Florida registration. dress of the registered a CORPORATION SI	Registered Agent.  Agent are:  ERVICE COMPA	You must designate an individual or	- ω ≾	
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(The Limited Liability Company ca another business entity with an acti The name and the Florida street add	nnot serve as its own R ive Florida registration. dress of the registered a CORPORATION SI	Registered Agent.  agent are: ERVICE COMPA  Name  (P.O. Box NOT a	You must designate an individual or	3 JAN -4 PH	

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)

(CONTINUED)

Title: "AMBR" = Authorized Member	Name and Address:	
"MGR" = Manager 	Nicholas Colucci 4761 West Bay Bird # 1805 Estro, Pr 33928	
AMBR	Adam Colucci 373 14013 Road Basking Ridge NJ 07720	
AMBR	Rola Juback 251 Bythmunic Wey Hopewell Junetin, NY 12533	2:
		4- NYF 8
(Use attachment if necessary)		PH 5:
CLE V: Effective date, if other than the dat effective date is listed, the date must be state of filling.)  If the date inserted in this block does not	te of filing:	က က က
CLE V: Effective date, if other than the dat effective date is listed, the date must be state of filling.)  If the date inserted in this block does not occument's effective date on the Department.	pecific and cannot be more than five business days prior to or 90 d meet the applicable statutory filing requirements, this date will not be	က က က
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ICLE V: Effective date, if other than the date is effective date is listed, the date must be spate of filing.)  If the date inserted in this block does not occument's effective date on the Department icle VI: Other provisions, if any.  REQUIRED SIGNATURE:  Signature of a mathematical transfer of the constitutes at third degree.	pecific and cannot be more than five business days prior to or 90 d meet the applicable statutory filing requirements, this date will not be	က က က

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)

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

ARTICLE IV-