

3/8/23, 12:02 PM

L23000107460Division of Corporations
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To:
Division of Corporations
Fax Number : (850)617-6381

From:
Account Name : ACCOUNTING HEART LLC
Account Number : I20220000077
Phone : (954)673-6545
Fax Number : (954)827-2314

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

Email Address: Htorres@accoheart.com**FLORIDA LIMITED LIABILITY CO.****Nuil One Group LLC**

Certificate of Status	0
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Estimated Charge	\$125.00

Electronic Filing Menu

Corporate Filing Menu

Help

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," "LLC," or "L.L.C.")*

NUIL ONE GROUP LLC

ARTICLE II - Address:

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

3301 N University Dr. Ste. 100
Coral Springs FL, 33065

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

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2023 MAR -8 AM 2:02
TALLAHASSEE, FL

Required Signatures:**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.

MILKO GRBIC**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)**

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STATE
TALLAHASSEE, FL

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