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SECRETARY OF STATE

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COVER LETTER

TO: Registration Section

Divis	sion of Corporations	
SUBJECT:	NKC Holdings, LLC	
•	(Name of L	mited Liability Company)
Florida," Cer		Liability Company for Authorization to Transact Business in submitted to register the above referenced foreign limited
Please return	all correspondence concerning this	matter to the following:
	W. William Gust, Esq	• •
	(1	Name of Person)
	Gentry Locke Rakes	& Moore
	(1	Firm/Company)
	P.O. Box 40013	(Address)
·		(Address)
	Roanoke, VA 24022-	0013
	(City/	State and Zip Code)
For further in	nformation concerning this matter, p	please call:
Bill	Gust	at (540) 983-9305
	(Name of Person)	(Area Code & Daytime Telephone Number)
MAILING ADDRESS:		STREET ADDRESS:
Division of Corporations		Division of Corporations
	Box 6327 hassee, FL 32314	Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301
	a check for the following amount: 25.00 Filing Fee \$\infty\$\$\text{\$\sum_\$130.00 Filing Fee}\$\$ Certificate	

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

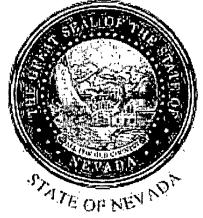
•		STATE OF TEXNER.		
1. NKC Holding (Name of Foreign L	JS, LLC imited Liability Company; must include	de "Limited Liability Company," "L.L.C	C.," or "LLC.")	
•				
	managing members adopting the alter	e of transacting business in Florida and nate name. The alternate name must inc		
_{2.} Nevada	ŕ	n/a		·
(Jurisdiction under the la company is organized)	w of which foreign limited liability	(FEI number, if applic	able)	
4. January 8, 2	008 5	Perpetual		
(Date of (Organization)	(Duration: Year limited liability con exist or "perpetual")	npany will cease	: to
_{6.} January 8, 2				· .
((Date first transacted business in Flo (See sections 608.501 & 608.502 F.S.	rida, if prior to registration.) to determine penalty liability)		
_{7.} 2101 Ocean	Drive, New Smyrna	Beach, Florida 3216	69	
	(Street Address of	of Principal Office)		
8 If limited liability a	ompany is a manager-managed	company check here		
·		• •		
		iging members or managers are as	_	
Nelson Cam	bata, 2101 Ocean D	rive, New Smyrna Be	ach, Flo	<u>rid</u> a
32169				
10. Attached is an original co	ertificate of existence, no more than 90 d	ays old, duly authenticated by the official	having custody c	of records in
the jurisdiction under the law		is not acceptable. If the certificate is in a		
11 Nature of husiness	or numoses to be conducted or	fromoted in Florida: OWN, O	perate	
	//		ാംഗ ജോ	
racing venici	es, development and	d sale of racing acces	EE Z	-7)
-			-5 AR: -5	-
(In accordance with section 608.408(3), F.S.	horized representative of a memb S., the execution of this document constitute	er a	m
	an affirmation under the penalties of perjuing Nelson Cambata	ry that the facts stated herein are true.)	PM 1: 29	O
-	Typed or printed	name of signee	-5 ⁻ -5 ⁻ -29	

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

The name of the Limited Liability Company is: NKC Holdings, LLC	
If name unavailable, the alternate name to be used in the state of Florida is:	
2. The name and the Florida street address of the registered agent and office are:	
Nelson Cambata	•
(Name)	-
2101 Ocean Drive Florida Street Address (P.O. Box NOT ACCEPTABLE)	-
New Smyrna Beach 32169 FL City/State/Zip	-
Having been named as registered agent and to accept service of process for the above soliability company at the place designated in this certificate, I hereby accept the appointing agent and agree to act in this capacity. I further agree to comply with the provisions of relating to the proper and complete performance of my duties, and I am familiar with an obligations of my position as registered agent as provided for in Chapter 608, Florida S	nent as registered all statutes nd accept the
(Signature) \$ 100.00 Filing Fee for Application \$ 25.00 Designation of Registered Agent \$ 30.00 Certified Copy (optional) \$ 5.00 Certificate of Status (optional)	PILED 2008 MAY -5 PH 1: 2 SECRETARY OF STATE TALLAHASSEE, FLORIE

SECRETARY OF STATE



CERTIFICATE OF EXISTENCE WITH STATUS IN GOOD STANDING

I, ROSS MILLER, the duly elected and qualified Nevada Secretary of State, do hereby certify that I am, by the laws of said State, the custodian of the records relating to filings by corporations, non-profit corporations, corporation soles, limited-liability companies, limited partnerships, limited-liability partnerships and business trusts pursuant to Title 7 of the Nevada Revised Statutes which are either presently in a status of good standing or were in good standing for a time period subsequent of 1976 and am the proper officer to execute this certificate.

I further certify that the records of the Nevada Secretary of State, at the date of this certificate, evidence, **NKC HOLDINGS**, **LLC**, as a limited liability company duly organized under the laws of Nevada and existing under and by virtue of the laws of the State of Nevada since January 8, 2008, and is in good standing in this state.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office on March 21, 2008.

ROSS MILLER Secretary of State

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Certification Clerk

SECRETARY OF STATE