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PICK-UP	☐ WAIT	MAIL
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Office Use Only



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NEWS TO GO

#### **COVER LETTER**

TO:	Registration Section Division of Corporat	ions		
SUBJ	ECT:	1	Nida Group, LLC	
5050			e of Limited Liability Compan	y
The en	closed "Application by	Foreign Limited Liabi nitted to register the abo	lity Company for Authorization	n to Transact Business in Florida," Certificate of liability company to transact business in Florida.
Please	return all corresponden	ce concerning this mat	ter to the following:	
			Ronald J. Nida	
			Name of Person	
			Firm/Company	<del></del>
	1755 Davis Dr.			
			Address	
	Merritt Island, FL 32952			
			City/State and Zip Code	
		jn	ida@cfl.rr.com	
		·	be used for future annual repo	rt notification)
For fur	ther information conce	rning this matter, please	e call:	
	Ronald	d J. Nida	at ( 321 ) 4	54-7348
	Na	me of Person	Area Code & Daytime Tele	ephone Number
	MAILING ADDRE Division of Corporati Registration Section P.O. Box 6327 Tallahassee, FL 3231	ions	STREET ADDRESS: Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	
	sed is a check for the \$125.00 Filing Fee	ne following amoun \$\int\$\$\$130.00 Filing Fee Certificate of Statu	& []\$155.00 Filing Fee &	\$160.00 Filing Fee, Certificate of Status & Certified Copy

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

	OMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, TED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE S.		REGISTER A F	'OREIGN
1				
٠٠_	Nida Group (Name of Foreign Limited Liability Company; must include	e "Limited Liability Company," "L.L.C.,"	" or "LLC.")	-
cons	ame unavailable, enter alternate name adopted for the purpose ent of the managers or managing members adopting the alternate pany," "L.L.C," "LLC.")	of transacting business in Florida and att ate name. The alternate name must include	ach a copy of the	written
2.	Delaware 3.	45-2789258		
co	Delaware  prisdiction under the law of which foreign limited liability mpany is organized)  3.	(FEI number, if applicabl	e)	-
4	7/20/2011 5.	Perpetual (Duration: Year limited liability compa		
	(Date of Organization)	(Duration: Year limited liability compa exist or "perpetual")	any will cease to	
6.	N/A		対照る	
-	(Date first transacted business in Flori (See sections 608.501 & 608.502 F.S. to	da, if prior to registration.) o determine penalty liability)	A R	- -T]
7	28 Old Ruc	dnick Lane	- <b>9</b>	F
	Dougs C	DE 10001	OF STATES, FLORIDA	
-	(Street Address of	DE 19901 Principal Office)	<u> </u>	-
8. I	flimited liability company is a manager-managed co	ompany, check here 🗸	ORIDA	
	he name and usual business addresses of the manag Ronald J. Nida - 1755 Davis Dr. Merritt Island		ollows:	_
-	Sandra L. Nida - 1755 Davis Dr. Merritt Is	sland, FL 32952		_
-				-
the ju	attached is an original certificate of existence, no more than 90 day risdiction under the law of which it is organized. (A photocopy is ation of the certificate under oath of the translator must be submit	s not acceptable. If the certificate is in a for		
11.	Nature of business or purposes to be conducted or p	romoted in Florida:		-
_	Real Estate Investing and Any C	Other Lawful Purpose		<b>_</b> •
		orized representative of a member		
	(In accordance with section 608.408(3), F.S., the executive penalties of perjury that the facts stated herein are true document to the Department of State constitutes a Ronald J. N	I am aware that any false information sul third degree felony as provided for in s.8	omitted in a	
	Typed or printed n	ame of signee		

### 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.

1. The name of	of the Limited Liability Co	ompany is:	
	N	ida Group, LLC	
If unavailable	, the alternate to be used in	n the state of Florida is:	
2. The name a	and the Florida street addr	ress of the registered agent and office ar	e:
		Ronald J. Nida	72 x
		(Name)	
		1755 Davis Dr.	ENCLES R-9 & HASSEE,
	Florida Street	Address (P.O. Box NOT ACCEPTABLE)	—— GF STA
	Merritt Island	<sub>FL</sub> 32952	10000000000000000000000000000000000000
		City/State/Zip	<del></del>
liability comparagent and agree relating to the	any at the place designated be to act in this capacity. I proper and complete perfo my position as registered a	and to accept service of process for the able in this certificate, I hereby accept the application of the application of the application of the application of the acceptance	pointment as registered ons of all statutes with and accept the
	\$ 100	Signature)  On Filing Fee for Application	

\$ 25.00

\$ 30.00

\$ 5.00

**Designation of Registered Agent** 

Certificate of Status (optional)

Certified Copy (optional)

## Delaware

PAGE 1

#### The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "NIDA GROUP, LLC" IS DULY FORMED

UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING

AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE

SHOW, AS OF THE FIRST DAY OF MARCH, A.D. 2012.

AND I DO HEREBY FURTHER CERTIFY THAT THE AFORESAID "NIDAGROUP, LLC" IS A SERIES LIMITED LIABILITY COMPANY.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "NIDA GROUP, LLC" WAS FORMED ON THE TWENTIETH DAY OF JULY, A.D. 2011.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE NOT BEEN ASSESSED TO DATE.

5013132 8300E

120263280

Jeffrey W. Bullock, Secretary of State

AUTHENT\(CATION: 9402316\)

DATE: 03-01-12

You may verify this certificate online at corp.delaware.gov/authver.shtml