M12000002482

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
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(Business Entity Name)				
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07/13/12--01022--017 **55.00



J. BRYAN

JUL 1 5 2012

EXAMINER

COVER LETTER

TO: Registration Division of	Section Corporations		
SUBJECT:	NOF	RA SHIPS, LLC	
		Limited Liability Comp	pany
Dear Sir or Madam	:		
	avit by Foreign Limit (s) and fee(s) are subr		Change Manager(s) or
Please return all co	rrespondence concern	ing this matter to the fol	llowing:
J. i	MICHAEL WERMU	TH	. m2
	Name of Person		F SE SE
GO:	NZALEZ & WERMU	ITH	FILED AND JUL 13 PM 1: 28 SECRETARY OF STATE SECRETARY OF STATE ALLAHASSEE, FLORIDA
	Firm/Company		35 3
0750 N		TE 405	SEA DO TO
8/50 N	W 36 STREET, SUI	1E 425	
	Address		07 2 2
DORAL, FLORIDA 33178			₩ ₩
•	City/State and Zip Co	de	Ź
М	CHAEL@RGMWLA	W COM	
E-mail address	s: (to be used for futur	e annual report notifica	tion)
For further informa	tion concerning this n	natter, please call:	
ROSARIO	PRADO at (305)	715-7157
Name o	ui 1	Area Code and Daytin	
Registration Division of C Clifton Build 2661 Executi	Corporations	MAILING A Registration S Division of C P.O. Box 632 Tallahassee, I	Section Corporations
	k for the following at \$\sum_\$30 Filing Fee & Certificate of Status	mount: √ \$55.00 Filing Fee & Certified Copy	\$60 Filing Fee, Certificate of Status & Certified Copy

AFFIDAVIT BY FOREIGN LIMITED LIABILITY COMPANY TO CHANGE MANAGER(S) OR MANAGING MEMBER(S)

The name of the limited liability compan Department of State is:	y as it appears on the records of the Florida NORA SHIPS, LLC .
2. This entity was formed under the laws of	
3. This entity was authorized to transact bus	siness in Florida on04/27/2012 er is M12000002482
4. The name and address of each manager of	or managing member is as follows:
<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:
MGR	EUGENIO CRESPO 9737 NW 41 STREET, SUITE 203 DORAL, FLORIDA 33178
	TALL AND
	TRETARY OF AHASS E FI
	1: 28 0RHDA
Required Signature:	
	Managing Member or Member Fee: \$25