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(Requ	estor's Na	ame)
(Addre	ess)	
(Addre	ess)	
(City/S	State/Zip/F	Phone #)
PICK-UP	∭ WAI	IT MAIL
(Busin	ess Entity	y Name)
(Доси	ment Num	mber)
Certified Copies	Certific	icates of Status
Special Instructions to Fili	ng Officer	n.
Name ∴⊘dabilitv		
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GEORETARY OF STATE

TRANSMITTAL LETTER

TO: Registration Section Division of Corporations				
•				
SUBJECT: Florida Bay Investment Group,	LLC			
(Name of Limited L	iability Company)			
The enclosed Articles of Organization and fee(s)	_			
Please return all correspondence concerning this r	natter to the following:			
Daniel Welch				
(Name of Person)				
Florido Boulous dos el 110		×1 S	03	
Florida Bay Investment Group, LLC		ECR.		
(Firm/Company)		ETA ATB		1
		SEI	22	
P.O. Box 770819		TARY OF STATE HASSEE, FLORIDA	:D-	
(Address)		-081 -081	AH 8 00	
,		A	00	
Naples, Florida 34107	-		_	
(City/State and Zip Code)				
For further information concerning this matter, ple	ease call:			
Daniel Welch at (239) 598-5234			
(Name of Person)	(Area Code & Daytime Telephone Number)			
STREET ADDRESS:	MAILING ADDRESS:			
Registration Section	Registration Section			
Division of Corporations	Division of Corporations			
409 E. Gaines Street Tallahassee, Florida 32399	P.O. Box 6327			
Tananassee, Fiorida 32377	Tallahassee, Florida 32314			

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

5.
nest Group, LLC
principal office of the Limited Liability Company is:
Mailing Address:
P.O. Box 770819
Naples, Florida 34107
d Office, & Registered Agent's Signature: registered agent are: THE
SSET 22
O. Box NOT acceptable) 34110
O. Box NOT acceptable)
FL 34110
and Zip

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 608, F.S..

Registered Agent's Signature

(CONTINUED)

ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

<u>Title:</u> "MGR" = Manager	Name and Address:			
"MGRM" = Managing Member	-			
MGRM	Daniel Welch			
	12945 Vanderbilt Drive			
	Naples, FL 34110			
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(Use attachment if necessary)		E O	2	Į11
NOTE: An additional article must be	added if an effective date is requested	E.S.	À	
110 X 23. 13th additional as there must be	audea ii all circuite date is requested.	STATE	ά	
REQUIRED SIGNATURE:		¥m	00	
Dan	ed Allelah			
Signature of a member of	or an authorized representative of a member.			

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

Filing Fees: \$100.00 Filing Fee for Articles of Organization

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

DANIEC J. WELCH
Typed or printed name of signee

\$ 5.00 Certificate of Status (Optional)