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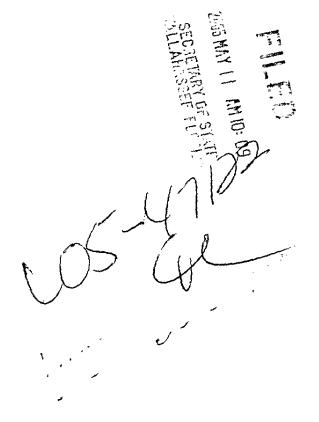
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### FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

May 5, 2005

JAMES NEIL 227 N.W. 7TH STREET BOCA RATON, FL 33432

SUBJECT: THE NEIL GROUP Ref. Number: W05000022879

We have received your document for THE NEIL GROUP and your check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of a Limited Liability Company must end with the words "limited company", "limited liability company" or their abbreviation "Ltd. Co." "L.C." or "L.L.C."

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6020.

Tammi Cline Document Specialist

SECRETARY OF SH

Letter Number: 505A00032312

# TRANSMITTAL LETTER

TO: Registration Section Division of Corporations		
SUBJECT: The Neil Group		
(Name of Limited	d Liability Company)	
The enclosed Articles of Organization and fee(s) are so	ubmitted for filing.	
Please return all correspondence concerning this matte	r to the following:	
James K. Neil		
	Name of Person)	
(1	Firm/Company)	
227 N.W. 7th Street		
	(Address)	
Boca Ra <u>t</u> on, FL 33432		
	State and Zip Code)	<del></del>
For further information concerning this matter, please	call:	
James K. Neil (Name of Person)	at (561) 843-6310 (Area Code & Daytime Te	Jenhone Number)
(2.44.2.02.2.0.0.0.0)	(rada codo de Dayanio Te	reprode realiser)
Enclosed is a check for the following amount:		
☐ \$125.00 Filing Fee	\$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	S160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
STREET ADDRESS: Registration Section Division of Corporations 409 E. Gaines Street Tallahassee, Florida 32399	MAILING AI Registration Son Division of Con P.O. Box 6327 Tallahassee, F.	ection Proporations
	2 4.2022400000 1	<u>تَ</u>

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

MITOGED OF CHURCH IEEE	COM LIGHTED LIADIEST I COM ACT		
ARTICLE I - Name: The name of the Limited Liability Company is:			
The Neil Group			
ARTICLE II - Address:			
The mailing address and street address of the princi	ipal office of the Limited Liability Company is:		
Principal Office Address:	Iailing Address:		
227 N.W. 7th Street 22	27 N.W. 7th Street		
Boca Raton, FL 33432	oca Raton, FL 33432		
ARTICLE III - Registered Agent, Registered Of	fice, & Registered Agent's Signature:		
The name and the Florida street address of the regis	stered agent are:		
James K. Neil			
Name			
227 N.W. 7th Street			
Florida street address	(P.O. Box NOT acceptable)		
Boca Raton, FL 33432 FI	<u></u>		
City, State, and Z	Ľip		
Having been named as registered agent and to accelliability company at the place designated in this registered agent and agree to act in this capacity. I statutes relating to the proper and complete perfor accept the obligations of my position as registered.	certificate, I hereby accept the appointment as further agree to comply with the provisions of all mance of my duties, and I am familiar with and		
Degistered Agent's Sig	nature SECRE AN OF SECRETARY OF		

Page 1 of 2

(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 "MGRM" = Managing Member	Name and Address:		
MGR	James K. Neil		
	227 N.W. 7th Street		
	Boca Raton, FL 33432		
MGRM	Victoria P. Neil		
	227 N.W. 7th Street		
	Boca Raton, FL 33432		
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(Use attachment if necessary)			
NOTE: An additional article must be added if an effective date is requested.			
REQUIRED SIGNATURE:			
- 1/1/1/			
Signature of a member or	an authorized representative of a member.		
(In accordance with section of this document constitutes that the facts stated herein	608.408(3), Florida Statutes, the execution an affirmation under the penalties of perjury are true.)		
JAMES	S & NEIL		
Typed o	r printed name of signee		

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

- \$ 30.00 Certified Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)