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SECRETARY OF STATE OF CORPORATIONS OF CORPORATIONS

TRANSMITTAL LETTER

TO:	Division of Corporations			
SUBJE	ECT: NEXUS Resource Group			
		imited Liability Company)		
Florida		Liability Company for Authorization to Transact Business in submitted to register the above referenced foreign limited		
Please	return all correspondence concerning this	s matter to the following:		
		Jeffery G. Jordan		
		Name of Person)		
	NE)	(US Resource Group		
	(Firm/Company)		
	11247	7 San Jose Blvd #1816		
(Address)				
	Jac	ksonville, FL 32223		
	(City)	/State and Zip Code)		
For fur	rther information concerning this matter,	please call:		
	Jeff Jordan	at (904) 880-9769		
	(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	P.O. Box 6327		
	Tallahassee, Florida 32399	Tallahassee, Florida 32314		
Enclos	sed is a check for the following amount:			
	\$125.00 Filing Fee ☐ \$130.00 Filing Fee Certificate	& 🗆 \$155.00 Filing Fee & 🗆 \$160.00 Filing Fee, Certificate		



FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

August 1, 2005

JEFFERY G. JORDAN 11247 SAN JOSE BLVD. #1816 JACKSONVILLE, FL 32223

SUBJECT: NEXUS RESOURCE GROUP

Ref. Number: W05000036161

We have received your document for NEXUS RESOURCE GROUP and your check(s) totaling \$125.00. 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 contain the designation "L.L.C.," "LLC," "L.C.," or "LC," or the words "LIMITED LIABILITY COMPANY," or "LIMITED COMPANY." Please amend the name of your entity accordingly.

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

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) 245-6067.

Neysa Culligan Document Specialist

Letter Number: 005A00049558

TRANSMITTAL LETTER

TO: Registration Section Division of Corporations			
SUBJECT: Nexus Resource Group, LLC			
(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 matter	er to the following:		
Jeffery G. Jordan			
n	Name of Person)		
Nexus Resource Group, LLC			
	Firm/Company)		
11247 San Jose Blvd # 1816		05 AUG 26 AM 11: 22	DIVISI
	(Address)	3	ECRETARY OF STAIL
		26	FR CC
Jacksonville, FL 32223		3	중국
(City)	/State and Zip Code)		75 A.A.
For further information concerning this matter, please	call:	22	SKO
Jeffery G Jordan	at (904) 742-7932		
(Name of Person)	(Area Code & Daytime Telephone Number)		
Enclosed is a check for the following amount:			
□ \$125.00 Filing Fee □ \$130.00 Filing Fee & Certificate of Status	☐ \$155.00 Filing Fee & ☐ \$160.00 File Certified Copy (additional copy is enclosed) ☐ \$160.00 File Certificate of Standard Copy is additional copy in the copy is a second control of the copy in the copy is a second copy in the copy in the copy in the copy is a second copy in the co	Status & y	Ź
STREET ADDRESS: Registration Section Division of Corporations 409 E. Gaines Street	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327		

Tallahassee, Florida 32314

Tallahassee, Florida 32399

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:			
The name of the Limited Liability Company is:			
Nexus Resource Group, LLC			
ARTICLE II - Address:			
The mailing address and street address of the pr	incipal office of the Limited Liability	/ Com	pany is:
Principal Office Address:	Mailing Address:		
11247 San Jose Blvd # 1816	PO Box 23036		
Jacksonville, FL 32223	Jacksonville, FL 32241		
ADTICLE III Decision I Asset Decision	1000 a C Decision of America Circu	_ 4	_
ARTICLE III - Registered Agent, Registered	i Uffice, & Registered Agent's Sign	ature:	:
The name and the Florida street address of the registered agent are:		95	J¥s
· · · · · · · · · · · · · · · · · · ·		AUG	<u>SSS</u>
Jeffery G Jordan			으켰~
Name		26	87
11247 San Jose Blvd # 1816			질득
Florida street address (P.O. Box NOT acceptable)			STA STA
Jacksonville, FL 32223	FL	AM 11: 22	TIONS
City, State,		•	m
,,	•		

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	
None	None
·	
(Use attachment if necessary)	
NOTE: An additional article must be	added if an effective date is requested.
REQUIRED SIGNATURE:	
Signature of member o	r 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.)

Jeffery G Jordan

Typed or 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)