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DIVISION OF CORPORATION

1381/3°

COVER LETTER

TO:

Registration Section

Division of Corporations	
SUBJECT: Family Investors Group	, Ltd. Liability CO.
(Name of Limi	ited Liability Company)
The enclosed Articles of Organization and fee(s) are	e submitted for filing.
Please return all correspondence concerning this ma	tter to the following:
James D. Sparks	
	(Name of Person)
Family Investors Group, Ltd	
	(Firm/Company)
21310 Lancaster Run # 102	23
	(Address)
Estero FL 33928	
(Ci	ity/State and Zip Code)
For further information concerning this matter, please	se call:
James D. Sparks	at (239) 285-3336
(Name of Person)	(Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:	
\$125.00 Filing Fee \$\times \text{\$130.00 Filing Fee & Certificate of Status}\$	S155.00 Filing Fee & S160.00 Filing Fee, Certified Copy Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street/Courier Address Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee. FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

(Must end with the words "Li	. Liability CO. mited Liability Company, "L.L.C.," or "LLC.")	-
ARTICLE II - Address:	of the principal office of the Limited Liebility (Compony is:
	of the principal office of the Limited Liability (Joinpany is:
Principal Office Address:	Mailing Address:	
21310 Lancaster Run # 1023	21310 Lancaster Run # 1023	
Estero FL 33928	Estero FL 33928	**************************************
	egistered Office, & Registered Agent's Signat	
	s own Registered Agent. You must designate an individual or and	other =
(The Limited Liability Company cannot serve as it business entity with an active Florida registration.	s own Registered Agent. You must designate an individual or and s of the registered agent are:	other =
(The Limited Liability Company cannot serve as it business entity with an active Florida registration.) The name and the Florida street address	s own Registered Agent. You must designate an individual or and s of the registered agent are:	SECRETARY NVISION OF CO.
(The Limited Liability Company cannot serve as it business entity with an active Florida registration. The name and the Florida street address James D. Spa	s own Registered Agent. You must designate an individual or and s of the registered agent are:	SECRETARY NVISION OF CO.
The name and the Florida street address James D. Spa 21310 Lancas	s own Registered Agent. You must designate an individual or and ss of the registered agent are: arks Name	SECRETARY NVISION OF CO.
The name and the Florida street address James D. Spa 21310 Lancas	s own Registered Agent. You must designate an individual or and assorted agent are: arks Name Ster Run # 1023 a street address (P.O. Box NOT acceptable)	other =

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 (REQUIRED)

(CONTINUED) Page 1 of 2 ARTICLE IV- Manager(s) or Managing Member(s):

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

MGR	James D. Sparks
	21310 Lancaster Run # 1023
	Estero FL 33928
MGRM	Marsha Sparks
	21310 Lancaster Run # 1023
	Estero FL 33928
	10-1-10-10-10-10-10-10-10-10-10-10-10-10
(Use attachment if necessary)	an the date of filing: 04/17/08 . (OPTIO

REQUIRED SIGNATURE:

Signature of a member 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.)

James D. Sparks

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)