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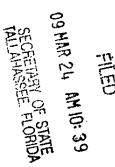
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M. THOMAS

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EXAMINER

# **COVER LETTER**

TO: Registration Section Division of Corporations
SUBJECT: McBailey Group, LLC
(Name of Limited Liability Company)
The enclosed Articles of Organization and fee(s) are submitted for filing.
Carmel M. Leannah
(Name of Person)
Please return all correspondence concerning this matter to the following:  Carmel M. Leannah  (Name of Person)  McBailey Group, LLC  (Firm/Company)
(Firm/Company)
12411 Commerce Lakes Dr., Suite 100
(Address)
Fort Myers, FL 33913
(City/State and Zip Code)
For further information concerning this matter, please call:
Carmel M. Leannah at ( 239 ) 337-1972
(Name of Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
\$125.00 Filing Fee \$\bigcup \\$130.00 Filing Fee & \bigcup \\$155.00 Filing Fee & \bigcup \\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)  Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing AddressStreet/Courier AddressRegistration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301

### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company	' is:	
McBailey Group, LLC	.iability Company, "L.L.C.," or "LLC.")	
ARTICLE II - Address: The mailing address and street address of the		Company is:
Principal Office Address:	Mailing Address:	09
12411 Commerce Lakes Dr., Suite 100 Fort Myers, FL 33913	12411 Commerce Lakes Dr., Suite 100 Fort Myers, FL 33913	HAR 24 1
ARTICLE III - Registered Agent, Registe (The Limited Liability Company cannot serve as its own R business entity with an active Florida registration.)	egistered Agent. You must designate an individual or and	
The name and the Florida street address of the	he registered agent are:	
Carmel M. Lear	nnah <sub>ame</sub>	
	e Lakes Dr., Suite 100 t address (P.O. Box NOT acceptable)	

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..

City, State, and Zip

33913

Registered Agent's Signature (REOUIRED

Fort Myers

(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:

MGRM	Carmel M. Leannah	
MGRIVI	12411 Commerce Lakes Dr., Suite 100	-
	Fort Myers, FL 33913	- -
MGR	Michael J. Leannah	_
	12411 Commerce Lakes Dr., Suite 100	<del>-</del>
	Fort Myers, FL 33913	_
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Use attachment if necessary)		疆
EV: Effective date, if other than the	ne date of filing: (OPTIO	ONAL)

## **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.)

# Carmel M. Leannah

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)