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EXAMINER

## **COVER LETTER**

Registration Section
Division of Corporations

SUBJECT: The Fo	undation Group, L.L.C.		
<del></del>		ted Liability Company	
	of Organization and fee(s) are		
rease return an corres	pondence concerning this mat	ice to the following.	
Rory Hiller			
		Name of Person	
The Foundat	ion Group, L.L.C.		
		Firm/Company	
655 Harbor Is	sland		
		Address	
Clearwater, F	FL 33767		
	Cit	ty/State and Zip Code	A.
roryhiller@gn		for future annual report notification)	
For further information	concerning this matter, pleas	•	HASS
D 137		070.0000	
Rory Hiller	of Person	at ( 727 ) 278-3600 Area Code & Daytime Telep	<u> </u>
		•	
Enclosed is a check f	or the following amount:		•
□\$125.00 Filing Fee	□\$130.00 Filing Fee & Certificate of Status	□\$155.00 Filing Fee & □ Certified Copy (additional copy is enclosed)	\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Address Registration Section	Street/Courier Address Registration Section	

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

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:** 

The name of the Limited Liability Company is:	
The Foundation Group. LLC  (Must end with the words "Limited Liabilit	y Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the pri	ncipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
655 Harbor Island	655 Harbor Island
Clearwater, FL 33767	Clearwater, FL 33767
(The Limited Liability Company cannot serve as its own Register business entity with an active Florida registration.)  The name and the Florida street address of the respective for the respective form of th	
Clearwater, FL 33767	TI.
	e, and Zip
Having been named as registered agent and to a liability company at the place designated in th registered agent and agree to act in this capacity. statutes relating to the proper and complete per	ccept service of process for the above stated limited is certificate, I hereby accept the appointment as I further agree to comply with the provisions of all formance of my duties, and I am familiar with and tered agent as provided for in Chapter 608, F.S

(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:

<u>Title:</u>	Name and Address:
"MGR" = Manager	•
"MGRM" = Managing Member	
MGRM	Rory Hiller
	655 Harbor Island
	Clearwater, FL 33767
	1-1-1-1
an effective date is listed, the date must	he date of filing: (OPTIONAL) be specific and cannot be more than five business days prior
or 90 days after the date of filing.)	Alba 🚤
REQUIRED SIGNATURES	
	NA SET 1
Valve	
-1010	58 5
Signature of a meln	ber or an authorized representative of a member
(In accordance with	section 608.408(3), Florida Statutes, the execution stitutes an affirmation under the ponalties of perjury
of this document cor that the facts stated	istitutes an affirmation under the penalties of perjury
that the facts stated	nerelli are true.)
<del></del>	SORO
	Typed or printed name of signee
Filing Fees:	<u> </u>

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent \$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)