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(Ac	dress)	<u> </u>
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MAR - 9 2012 T. HAMPTON

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Reality Investment Group, LLC	
Name of Limited Liability Company	
The enclosed Articles of Organization and fee(s) are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
Stuart B. Chesky	
Name of Person	
Reality Investment Group.LLC	
Firm/Company	
3333 N Tamiami Trail	
Address	
Sarasota FL 34234	
City/State and Zip Code	
docstuc@adelphia.net E-mail address: (to be used for future annual report notification)	
,	
For further information concerning this matter, please call:	
Stuart B. Chesky at (440) 213-4105	
Name of Person Area Code & Daytime Telephone N	Number
Enclosed is a check for the following amount:	
Certificate of Status Certified Copy Cert (additional copy is enclosed) Cert	0.00 Filing Fee, ifficate of Status & iffied Copy itional 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	s:	
	•	
Reality Investment Group, LL		
(Must end with the words "Limited Lial	bility Company, "L.L.C.," or "LLC.")	
ARTICLE II - Address:		
The mailing address and street address of the	principal office of the Limited Liabil	ity Company is:
Principal Office Address:	Mailing Address:	
3333 N Tamiami Trail	13301 W. lake Road	
Sarasota FL 34234	Vermilion, Ohio 44089	
		/
ARTICLE III - Registered Agent, Registered The Limited Liability Company cannot serve as its own Region business entity with an active Florida registration.)	ed Office, & Registered Agent's Signistered Agent. You must designate an individual	znature: or another
The name and the Florida street address of the	e registered agent are:	
Stuart B. Chesky		
Nam	ie	
8839 Brookfield	Terrace	
Florida street a	ddress (P.O. Box NOT acceptable)	
Bradenton,	_{FL} 34212	
City, S	State, and Zip	
Having been named as registered agent and to liability company at the place designated in registered agent and agree to act in this capac statutes relating to the proper and complete paccept the obligations of my position as reg	n this certificate, I hereby accept the ap city. I further agree to comply with the performance of my duties, and I am far	opointment as provisions of al miliar with and
Registered Agent's Sign	uture (REQUIRED)	DIVISION
(CONTI	NUED)	8 87
Page 1 o	f2	

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 Memb	per
MGR	Stuart B. Chesky
	13301 W. lake Road
•	Vermilion, Ohio 44089
	+ 100 Marketina - 1

(Use attachment if necessary)	
•	
CLE V: Effective date, if other i	than the date of filing: (OPTIONAL
90 days after the date of filing.)	must be specific and cannot be more than five business days
or and a management of the same of	
DECLUDED SIGNATURE.	
REQUIRED SIGNATURE:	
, ·	\ X\ \//\/
	×/\////
Signature of	member or an authorized representative of a member.
(In accordance with see	ction 608.408(3), Floring Statutes, the execution of this document
(In accordance with seconstitutes an affirmat I am aware that any fa	ction 608.408(3), Florida Statutes, the execution of this document ion under the penalties of perjury that the facts stated herein are true.
(In accordance with seconstitutes an affirmat I am aware that any faconstitutes a third degr	ction 608.408(3), Florida Statutes, the execution of this document ion under the penalties of perjury that the facts stated herein are true.

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)