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SECRETARY OF STATE DIVISION OF CORPORATION OF CORPORATION OF CORPORATION OF LEGISLATION OF LEGISLATION OF STATE OF STATE

C. LEWIS

MAR 1 3 2013

EXAMINER

(850) 245-69*3*1.

## COVER LETTER

TO:

Registration Section
Division of Corporations

SUBJECT

XGS II, 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:

David G Pendell	
Name of Person	
XGS II, LLC	
Firm/Company	
1740 Persimmon Drive #100	
Address	
Naples, FL 34109	
City/State and Zip Code	
vickypendell@advancedstagecapital.com	

For further information concerning this matter, please call:

David G Pendell

Name of Person

239

E-mail address: (to be used for future annual report notification)

<del>325-2001</del>

to4-8806

Area Code & Daytime Telephone Number

oney

Enclosed is a check for 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 Fec, 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:** 

The name of the Limited Liability Company is	:	
XGS II, LLC		
(Must end with the words "Limited Liab	nility Company, "L.L.C.," or "LLC.")	
ARTICLE II - Address:		
The mailing address and street address of the p	principal office of the Limited Liability Compa	any is:
Principal Office Address:	Mailing Address:	
1740 Persimmon Drive #100	1740 Persimmon Drive #100	
Naples, FL 34109	Naples, FL 34109	
ARTICLE III - Registered Agent, Registere (The Limited Liability Company cannot serve as its own Registusiness entity with an active Florida registration.)	ed Office, & Registered Agent's Signature: stered Agent. You must designate an individual or another	SECRE TA DIVISION OF 2013 MAR
The name and the Florida street address of the	registered agent are:	RR TA
David G Pendell		2 GRE
Name		
1740 Persimmon Drive #100		F STAT
Florida street ac	ddress (P.O. Box NOT acceptable)	8: 46
Naples	FL 34109	<b>.</b>
City, S	State, and Zip	

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

Title		Name and Address:	AP .
<u>Title:</u> "MGR" = Mana	cor	Name and Address:	" /2 <sub>.</sub> "
"MGRM" = Ma		aging Member(s): Or or Managing Member is as follows:  Name and Address:	•
MGR		David G Pendell	
		1740 Persimmon Drive #100	
		Naples, FL 34109	
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Page 2 of 2

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)