# Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850) 617-6383

From:

Account Name : CORP USA Account Number : 072450003255 Phone : (305)634-3694

Fax Number : (786)409-5946

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one smail address please.\*\*

Email Address:

## FLORIDA LIMITED LIABILITY CO. NEPTUNE GROUP REALTY, LLC

Certificate of Status	1
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Page Count	04
Estimated Charge	\$160.00

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### COVER LETTER

	sistration Section ision of Corporations
SUBJECT:	Neptune Group Realty, LLC
	Name of Limited Liability Company
The enclosed	1 Articles of Organization and fee(s) are submitted for filing.
Please return	all correspondence concerning this matter to the following:
	DJ Parker
-	Name of Person
	Neptune Group Realty
-	Firm/Company
	1003 SE 17th Street, Suite 200
_	Address
	Fort Lauderdale, FL 33316
_	City/State and Zip Code
-	djparker@ngyi.com E-mail address: (to be used for future annual report notification)
For further in	of formation concerning this matter, please call:
DJI	Parker 954 524 7978
<del></del>	Name of Person Area Code Duytime Telephone Number
Enclosed is a	check for the following amount:
\$125.00 Fili	ng Fee \$130.00 Filing Fee & \$155.00 Filing Fee & \$160.00 Filing Fee, Certificate of Status Certified Copy Certificate of Status &

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

Street/Courier Address Registration Section Division of Corporations Clifton Bullding 2661 Executive Center Circle Tallahassee, FL 32301

(additional copy is enclosed)

02/II/S0Id 16:09

Certified Copy (additional copy is enclosed)

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

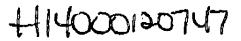
Neptune Group Resity, LLC.		_
(Must end with the words	"Limited Liability Company, "L.L.C.," or "LLC.")	
ARTICLE II - Address;		
The mailing address and street address of the p	rincipal office of the Limited Liability Company is:	
Principal Office Address:	Mailing Address:	
1901 South Federal Highway, Suite 3	1003 SE 17th Street, Suite 200	
Fort Lauderdale, FL 33316	Fort Lauderdale, FL 33318	
ARTICLE III - Registered Agent, Registered	Office, & Registered Agent's Signature:	dual co
(The Limited Liability Company cannot serve a	s its own Registered Agent. You must designate an individ	神 海色
(The Limited Liability Company cannot serve a another business entity with an active Florida r.	s its own Registered Agent. You must designate an individual segment of the segme	MAHAY 1
The Limited Liability Company cannot serve a another business entity with an active Florida r.	s its own Registered Agent. You must designate an individual segment of the segme	14 MAY 2
(The Limited Liability Company cannot serve a another business entity with an active Florida r. The name and the Florida street address of the r	s its own Registered Agent. You must designate an individual segment of the segme	14 MAY 21 F
(The Limited Liability Company cannot serve a another business entity with an active Florida r. The name and the Florida street address of the r	s its own Registered Agent. You must designate an individual egistration.) egistered agent are:  Name	14 MAY 21 PH SECNETARY OF S SLLAHASSEE, FI
(The Limited Liability Company cannot serve a another business entity with an active Florida r. The name and the Florida street address of the roll Parker  1003 SE 17in Street, Scale 200	s its own Registered Agent. You must designate an individual egistration.) egistered agent are:  Name	14 MAY 21 PH I
another business entity with an active Florida r.  The name and the Florida street address of the r  OJ Parker  1003 SE 17th Street, Scale 200	s its own Registered Agent. You must designate an individual egistration.)  egistered agent are:  Name	14 MAY 21 PH L

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 605, F.S..

Registered Agent's Signature (REOURED)

(CONTINUED)

Page 1 of 2



Name and Address:
ED CARLISLE
1901 SOUTH FEDERAL HIGHWAY, SUITE 3
FORT LAUDERDALE, FL 33316
DJ PARKER
1003 SE 17TH STREET, SUITE 200
FORT LAUDERDALE, FL 33316
A. A.
(A)
of filing: NA (OPTIONAL)
ecific and cannot be more than five business days prior to or 50 days after
(TT 6.2)
LORDE S
•

constitutes an affirmation under the penalties of perjury that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)

DJ PARKER

Typed or printed name of signer

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)

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