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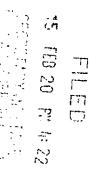
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S. YOUNG

COVER LETTER

TO:	Registration Section Division of Corporations	,
SUBJ	ECT: Neto Property Investments, LLC Name of Li	mited Liability Company
The en	closed Articles of Organization and fee(s) a	are submitted for filing.
Please	return all correspondence concerning this n	natter to the following:
	Robert A. Neto	Name of Person
	Neto Property Investments, LLC	Firm/Company
	5014 Fort Rd	Address
	Greenwood, FL 32443	City/State and Zip Code
<u>_c</u> l	nipoladivers@gmail.com E-mail address: (to be use	ed for future annual report notification)
For fu	ther information concerning this matter, ple	ease call:
Robe	nt A. Neto at (850) 594-7991 Area Code Daytime Telephone Number
_	ed is a check for the following amount: 10 Filing Fee Signal Signal	S155.00 Filing Fee & S160.00 Filing Fee, Cartified Copy Certificate of Status & Certified Copy (additional copy is enclosed) (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:			
Neto Property Investments, LLC (Must end with the words "Lin	imited Liability Company, "L.L.C.," or "LLC.")		
ARTICLE II - Address: The mailing address and street address of the principal control of the pri	cipal office of the Limited Liability Company is:		
Principal Office Address:	Mailing Address:		
5014 Fort Rd	5014 Fort Rd		
Greenwood, FL 32443	Greenwood, FL 32443		
another business entity with an active Florida regis The name and the Florida street address of the regis Robert A. Neto		71LF	
5014 Fort Rd		2 5	
Florida street address (P.O	D. Box <u>NOT</u> acceptable)		
Greenwood	FL 32443	22	
City	Zip		
capacity. I further agree to comply with the provis of my duties, and I am familiar with and accept the Robert A.	accept the appointment as registered agent and agrisions of all statutes relating to the proper and comp the obligations of my position as registered agent as Chapter 605, F.S	ree to act in this plete performance	

(CONTINUED)

Page 1 of 2

<u> Citle:</u>	Name and Address:		
AMBR" = Authorized Member MGR" = Manager			
MGR	Robert A. Neto		
	5014 Fort Rd		
	Greenwood, FL 32443		
MGR	Jennifer C. Neto		
	4138 Vereen		
	Greenwood, FL 32443		
MGR	Fernanda M. Neto		
	141 Blackford Ave		
	Piscataway, NJ 08854		
MGR	Denise A. Salamance		
	2381 Lake Park Terrace		
	Scotch Plains, NJ 07076		
ctive date is listed, the date must be sp f filing.)	e of filing: (OPTI pecific and cannot be more than five business days	ONAL) prior to or 9	0 da
ctive date is listed, the date must be sp	e of filing: (OPTI secific and cannot be more than five business days	ONAL) prior to or 9	0 da
ctive date is listed, the date must be sp filing.) VI: Other provisions, if any. REQUIRED SIGNATURE:	e of filing: (OPTI pecific and cannot be more than five business days	ONAL) prior to or 9	0 da
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REQUIRED SIGNATURE: Report A Signature of a me (In accordance with section 60 constitutes an affirmation under I am aware that any false information for the section of	ember or an authorized representative of a member of the penalties of perjury that the facts stated herein mation submitted in a document to the Department on a provided for in s.817.155, F.S.)	er. s document	0 da
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REQUIRED SIGNATURE: REQUIRED SIGNATURE: Signature of a me (In accordance with section 60 constitutes an affirmation under I am aware that any false information constitutes a third degree felon Robert A. Neto \$125.00 Filing Fee for Articles of Org. \$30.00 Certified Copy (Optional)	ember or an authorized representative of a member of the penalties of perjury that the facts stated herein mation submitted in a document to the Department of a sprovided for in s.817.155, F.S.) Typed or printed name of signee Filing Fees: ganization and Designation of Registered Agent	er. s document are true. of State	