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COVER LETTER'

	Registration Section Division of Corporations
SUBJEC	Bethel Property Investments, LLC
SUBJEC	Name of Limited Liability Company
The enclo	sed Articles of Organization and fee(s) are submitted for filing.
Please ret	urn all correspondence concerning this matter to the following:
	Eric Nickens
	Name of Person
	Bethel Property Investments, LLC
	Firm/Company
	10129 Belgrave Road
	Address
	Tampa, FL 33626
	City/State and Zip Code
	enickens34@gmail.com
	E-mail address: (to be used for future annual report notification)
For further	information concerning this matter, please call:
	Eric Nickens 813 3093309 at ()
	Name of Person Area Code Daytime Telephone Number
Enclosed	is a check for the following amount:
\$125.001	Siling Fee \$\ \times \text{S130.00 Filing Fee & Certificate of Status} \ \text{Certified Copy (additional copy is enclosed)} \ \text{S160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)} \ \text{Certified Copy (additional copy is enclosed)} \ Certified Copy (additional copy i

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

Street Address

New Filing Section
Division of Corporations
Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ex 3/9

ARTICLE I - Name:	1			2.31
The name of the Limited Liability	Company is:			
Bethel Property Inves				
(Must end v	with the words "Limited Li	iability Compa	any, "L.L.C.," or "LLC.")	
ARTICLE II - Address: The mailing address and street ad	dress of the principal offic	ce of the Limi	ted Liability Company is:	
<u>Principa</u>	<u>l Office Address</u> :		Mailing Addre	<u>:ss</u> :
Bethel Property Inves	tments, LLC	В	ethel Property Investments, I	LC
10129 Belgrave Road		10	0129 Belgrave Road	
Tampa, FL 33626		\overline{T}	ampa, FL 33626	
ARTICLE III - Registered Age (The Limited Liability Company another business entity with an act The name and the Florida street a	cannot serve as its own Rective Florida registration.)	egistered Agei		ividual or 2015 AUG 12
	•	Vame		
	10129 Belgrave Road			1.6
	Florida street address (l	P.O. Box <u>NO</u>	[acceptable]	1977
	Tampa, FL 33626			41.
	City	State	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 605, F.S..

Registered Agent's Signature (REOUIRED

(CONTINUED)

Page 1 of 2

Title: "AMBR" = Authorized Member	Name and Address:
"MGR" = Manager	
AMBR	Eric Nickens
	10129 Belgrave Road
	Tampa, FL 33626
AMBR	Kristen Nickens
	10129 Belgrave Road
	Tampa, FL 33626
EV: Effective date, if other than the datective date is listed, the date must be so of filing.)	te of filing: August 9, 2015 (OPTIONAL) specific and cannot be more than five business days prior to or 9
Sective date is listed, the date must be so of filing.) If the date inserted in this block does not iment's effective date on the Department	pecific and cannot be more than five business days prior to or 90 meet the applicable statutory filing requirements, this date will no
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EV: Effective date, if other than the datective date is listed, the date must be sof filing.) The date inserted in this block does not ment's effective date on the Department. EVI: Other provisions, if any. REOUIRED SIGNATURE: Signature of a material This document is exected a material any fall.	meet the applicable statutory filing requirements, this date will not of State's records.
EV: Effective date, if other than the date dective date is listed, the date must be sof filing.) The date inserted in this block does not ment's effective date on the Department. EVI: Other provisions, if any. REOUIRED SIGNATURE: Signature of a material This document is exected any aware that any fall.	meet the applicable statutory filing requirements, this date will not of State's records. Machine to State's records. Member or an authorized representative of a member. State information submitted in a document to the Department of State are felony as provided for in s.817.155, F.S.
EV: Effective date, if other than the date ective date is listed, the date must be sof filing.) The date inserted in this block does not ment's effective date on the Department. EVI: Other provisions, if any. REOUIRED SIGNATURE: Signature of a man This document is exect I am aware that any fall constitutes a third degree.	meet the applicable statutory filing requirements, this date will not of State's records. State's records. Compared to a member or an authorized representative of a member. State in accordance with section 605.0203 (1) (b), Florida Statutes, see information submitted in a document to the Department of State.

as