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Florida Department of State
Division of Corporations
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To: Division of Corporations
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Email Address: rlyons@lyons-law.com

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FLORIDA LIMITED LIABILITY CO.
JEFF SCHREIER DESIGN GROUP, LLC

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$125.00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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**ARTICLES OF ORGANIZATION
OF
JEFF SCHREIER DESIGN GROUP, LLC**

ARTICLE I - NAME

The name of the limited liability company is Jeff Schreier Design Group, LLC, ("company").

ARTICLE II - ADDRESS

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:
777 Fountainhead Lane
Naples, Florida 34103

Mailing Address:
777 Fountainhead Lane
Naples, Florida 34103

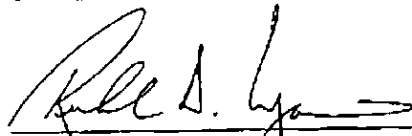
**ARTICLE III - REGISTERED AGENT,
REGISTERED OFFICE, & REGISTERED AGENT'S SIGNATURE**

The name and the Florida street address of the registered agent are:

Elizabeth G. Schreier
777 Fountainhead Lane
Naples, Florida 34103

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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.



Richard D. Lyons, as attorney-in-fact for
Elizabeth G. Schreier

ARTICLE IV - MANAGERS OR MEMBERS

The name and address of each person authorized to manage and control the Limited

ARTICLES OF ORGANIZATION OF JEFF SCHREIER DESIGN GROUP, LLC

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Liability Company:

Title:

"MGR" = Manager

"AMBR" = Authorized Member

Name and Address:

MGR

Jeffrey M. Schreier
777 Fountainhead Lane
Naples, Florida 34103

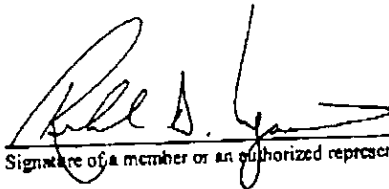
MGR

Elizabeth M. Schreier
777 Fountainhead Lane
Naples, Florida 34103

ARTICLE V - EFFECTIVE DATE

The effective date of the company shall be January 1, 2018.

REQUIRED SIGNATURE:



Signature of a member or an authorized representative of a member.

This document is executed in accordance with section 605.0203(1)(b), Florida Statutes. 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.

Richard D. Lyons

Typed or printed name of signor

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