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PICK-UP	☐ WAIT ☐ MAIL
(Bus	siness Entity Name)
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Certified Copies	Certificates of Status
Special Instructions to F	Filing Officer
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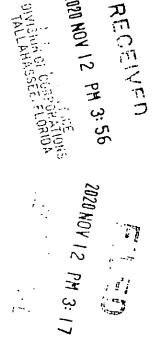




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	INC.			venue. Tallahassee, Florida 32303 (850) 222-2666 or (800) 969-1666, Fax (850) 222-1666
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COVER LETTER

TO:	New Filing Se Division of Co				
SUBJEC	****	Ity and Investments i	LLC		
3003120	- 1 ·	Name	of Limited Lial	oility Company	
The encl	osed Articles of	Organization and fe	e(s) are submitt	ed for filing.	
Please re	turn all corresp	ondence concerning	this matter to th	e following:	
	Kevin A. De	enti, Esquire			
			Name	of Person	
	Kevin A. Do	enti, P.A.			
			Firm/0	Company	
	2180 Immol	kalee Road - Suite #3	316		
			Ad	dress	
	Naples, Flor	rida 34110			
	kdenti@denti	law som	City/State	and Zip Code	
			e used for futur	e annual report notificati	on)
For further	information co	ncerning this matter.	please call:		
	Kevin A. De	•	239 _at (260-8111	
		ie of Person) Daytime Telephon	
Enclosed	is a check for t	he following amount	:		
≣\$ 125.0	00 Filing Fee	□\$130.00 Filing Certificate of State	us Cert	155.00 Filing Fee & ified Copy onal copy is enclosed)	☐\$160.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)
	New F Division P.O. B	iling Section on of Corporations ox 6327 assee, FL 32314		Street Address New Filing Section Di The Centre of Tallaha 2415 N. Monroe Stree Tallahassee, FL 3230	assee et, Suite 810

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

Good Realty and Inv	estments LLC			
(Must cons	atin the words "Limited	Liability Company, "	L.C.," or "LLC.")	
RTICLE II - Address:				
e mailing address and street a	ddress of the principal o	ffice of the Limited I.	iability Company is:	
Princip	al Office Address:		Mailing Address:	:
328 Sugar Pine Lane	<u> </u>	328 S	ugar Pine Lane	
Naples, Florida 3410	8	Naple	s. Florida 34108	
				dual or
RTICLE III - Registered Age The Limited Liability Company nother business entity with an a	cannot serve as its own	Registered Agent, Yo		
he Limited Liability Company	cannot serve as its own active Florida registratio	Registered Agent. Yon.)		
The Limited Liability Company nother business entity with an a	cannot serve as its own active Florida registratio address of the registered	Registered Agent. Yon.) d agent are:		
The Limited Liability Company nother business entity with an a	cannot serve as its own active Florida registratio	Registered Agent. Yon.) d agent are:		2020 NOV
The Limited Liability Company nother business entity with an a	cannot serve as its own active Florida registratio address of the registered Kevin A. Denti, Esqu	Registered Agent. Youn.) d agent are: uire Name		2020 NOV 12
The Limited Liability Company nother business entity with an a	cannot serve as its own active Florida registratio address of the registered	Registered Agent. Youn.) I agent are: uire Name ad - Suite #316	ou must designate an individ	2020 NOV
The Limited Liability Company nother business entity with an a	cannot serve as its own active Florida registration address of the registered Kevin A. Denti, Esqual 2180 Immokalee Roa	Registered Agent. Youn.) I agent are: uire Name ad - Suite #316	ou must designate an individ	2020 NOV 12

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 (REQUIRED)

(CONTINUED)

ARTICLE IV-The name and address of each person authorized to manage and control the Limited Liability Company: Name and Address: "AMBR" = Authorized Member "MGR" = Manager <u>MGR</u> Stephen E. Good 328 Sugar Pine Lane Naples, Florida 34108 (Use attachment if necessary) ARTICLE V: Effective date, if other than the date of filing: ___ ___. (OPTIONAL) (If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records. ARTICLE VI: Other provisions, if any. 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.

Keyin A. Denti, Esquire

Typed or printed name of signee

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)