## 123000647390

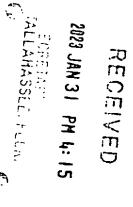
(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



800401442248

2023 JAN 31 PH 2:21 SECRETARY OF STATE





115 N CALHOUN ST., STE. 4 TALLAHASSEE, FL 32301 P: 866.625.0838 F: 866.625.0839 COGENCYGLOBAL.COM

Account#: I20000000088

Date:	01/31/2023	
	Chris Vick	<del>_</del>
	1892163	_
Entity Name:	NAPLES EXECUTIVE	REAL ESTATE GROUP, LLC
✓ Article	es of Incorporation/Authorization	to Transact Business
☐ Amen	dment	
Chang	ge of Agent	
Reins	tatement	
Conve	ersion	
Merge	er	
Dissol	lution/Withdrawal	
Fictition	ous Name	
Other		
Authorized A	mount \$125.00	
Signature: _	Wi Jek	

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

	Naples Executive F	Real Estate Gro	up, LLC	
(Must cont:	ain the words "Limited Liab	ility Company, "L.L.	C.," or "LLC.")	
ARTICLE II - Address: The mailing address and street ac	ddress of the principal office	of the Limited Liabi	lity Company is:	
Princip:	al Office Address:		Mailing Address:	35 33 202
	arthouse Circle	143	66 Charthouse Circle	ZOZ3 JAN 31 SECRETARY
<u>Naples</u>	s, FL 34114	_	Naples, FL 34114	
The same and the Ulerida street	addrace of the registered and	nt are:		) 22: 22
The name and the Florida street a	•	nt are: CY GLOBAL IN	C	: 22
The name and the Florida street a	COGEN		C	: 22
The name and the Florida street a	COGENO	CY GLOBAL IN	<del></del>	: 22 AFF
The name and the Florida street a	COGENO	CY GLOBAL IN	suite 4	; 22 : 22
The name and the Florida street a	COGENO Na 115 North Ca	CY GLOBAL IN	suite 4	; 22 : 22
The name and the Florida street a	COGENO Na 115 North Ca Florida street address (P.	CY GLOBAL INC alhoun Street, S O. Box <u>NOT</u> accepto	Suite 4	; 22
The name and the Florida street a Having been named as registered a place designated in this certificate, further agree to comply with the property am familiar with and accept the ob-	COGENO Na 115 North Ca Florida street address (P. Tallahassee City  Igent and to accept service of thereby accept the appoints ovisions of all statutes relations.	CY GLOBAL INCome  alhoun Street, S O. Box NOT accepts  Florida  State  f process for the above the street agoing to the proper and c	Suite 4  able)  32301  Zip  re stated limited liability comparent and agree to act in this capacomplete performance of my due	ny at the ucity. T

(CONTINUED)

		Name and Address:
"AMBR" = 7 "MGR" = M	Authorized Member	
MG = MOK = MG		Michael Sciore
		14366 Charthouse Circle
		Naples, FL 34114
MG	iR	Mariangie Sciore
		14366 Charthouse Circle
		Naples, FL 34114  Naples FL 34114  ARR ARR ARR ARR ARR ARR ARR ARR ARR A
		<b>一</b>
	<del></del>	A A
		<u> </u>
		<u> </u>
	<del></del>	
		ci N
LE V: Effecti		ate of filing:
LE V: Effective date is of filing.) If the date insequent's effect	ve date, if other than the da listed, the date must be	specific and cannot be more than five business days prior to or 90 days timeet the applicable statutory filing requirements, this date will not be l
LE V: Effective date is of filing.) If the date inseument's effect	we date, if other than the da listed, the date must be rted in this block does no ive date on the Departmen	specific and cannot be more than five business days prior to or 90 day t meet the applicable statutory filing requirements, this date will not be l
LE V: Effective date is of filing.) If the date inseument's effect	ve date, if other than the da listed, the date must be rted in this block does no ive date on the Department provisions, if any.	specific and cannot be more than five business days prior to or 90 days timeet the applicable statutory filing requirements, this date will not be l
LE V: Effective date is of filing.) If the date inseument's effect	rted in this block does no ive date on the Department provisions, if any.  Signature of a : This document is exert am aware that any fa	specific and cannot be more than five business days prior to or 90 day  1 meet the applicable statutory filing requirements, this date will not be left of State's records.
LE V: Effective date is of filing.) If the date inseument's effect	rted in this block does no ive date on the Department provisions, if any.  Signature of a : This document is exert am aware that any fa	/s/ Michael Sciore member or an authorized representative of a member. cuted in accordance with section 605.0203 (1) (b). Florida Statutes. lse information submitted in a document to the Department of State

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

ARTICLE IV-

\$ 5.00 Certificate of Status (Optional)