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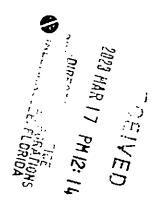
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S. CHATTHAM





## CT CORP

### 3458 Lakeshore Drive, Tallahassee, FL 32312 850-656-4724

wil DW

03/17/2023

Date:

		Acc#I20160000072	
Name:	NEXUS Well	ington, LLC	
Document #:			
Order #:	14843325		
Certified Copy of Arts & Amend: Plain Copy: Certificate of Good Standing: Certified Copy of			
Apostille/Notarial Certification:		Country of Destination:  Number of Certs:	
Filing: 🚺	Certified: [ Plain: [ COGS: [	✓ 	Email Address for Annual Report Notifications:
Availability  Document  Examiner  Updater  Verifier  W.P. Verifier  Ref#	Amount: \$	155.00	

Thank you!

#### COVER LETTER

	ew Filing Sections of Cor					
AUD 1867		ellington, LLC				
SUBJECT	l:	Name	of Limit	ed Liabilit	y Company	
The enclos	sed Articles of	Organization and fe	:e(s) are s	ubmitted	or filing.	
Please retu	ım all correspo	ndence concerning	this matte	er to the fo	llowing:	
	Michelle Dad	lisman				
				Name of I	Person	
	Tavistock Fir	nancial, LLC				
	-	-		Firm/Cor	npany	<del></del>
	9350 Conroy	Windermere Road				
	·	· · · · · · · · · · · · · · · · · · ·		Addre	SS	
	Windermere,	FL 34786				
		· · · · ·	City	//State and	Zip Code	
		n@tavistock.com				
	Ε	:-mail address: (to b	e used fo	r future ar	nual report notificati	on)
For further i	nformation cor	ncerning this matter	, please c	all;		
	Michelle Dad	isman	407		909-9957	
	Name	e of Person			Daytime Telephon	e Number
Enclosed is	s a check for th	ie following amoun	t:			
□\$125.00	Filing Fee	□\$130.00 Filing Certificate of Sta	tus	Certifie	.00 Filing Fee & d Copy l copy is enclosed)	☐\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	New Fi Divisio	g Address ling Section on of Corporations		1	itreet Address New Filing Section Di The Centre of Tallaha	issec

P.O. Box 6327 Tallahassee, FL 32314 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

#### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:	Com-onu in				
The name of the Limited Liabilit	y Company is:				
NEXUS Wellington,	LLC				
		Liability Compa	any, "L.L.C.," or "LLC.")	-	
ARTICLE II - Address:					
The mailing address and street ac	ldress of the principal o	ffice of the Lim	ited Liability Company is:		
Princips	al Office Address:		Mailing Address:		
9350 Conroy Winder	mere Road		9350 Conroy Windermere Road	_	
Windermere, FL 3478	36	<u>-</u>	Windermere, FL 34786	-	
ARTICLE III - Registered Age (The Limited Liability Company another business entity with an a The name and the Florida street a	cannot serve as its own ctive Florida registration	Registered Age on.) I agent are: em Name	ent. You must designate an individual or	2023 HAR 17 AH 7: 04 SECREMAY OF STATE	
	Plantation	FL	33324		
	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 (REQUIRED)

Sherry McGinnes, Assistant Secretary (CONTINUED)

Showy McGinnes

9 A A A D D 9 - A cobb a sign of A familiar	Name and Address:	
"AMBR" = Authorized Member "MGR" = Manager		
MGR	Douglas McMahon 9350 Conroy Windermere Road Windermere, FL 34786	
MGR	Lauren Morgan 9350 Conroy Windermere Road Windermere, FL 34786	
MGR	Donva Myrick 9350 Conroy Windermere Road Windermere, FL 34786	57.00 
		(500) (500) (700) (700) (700)
		~ =-1
(Use attachment if necessary)  CLE V: Effective date, if other than the d	ate of filing:	(OPTIONAL)
CLE V: Effective date, if other than the defective date is listed, the date must be to of filing.)	specific and cannot be more than five business of meet the applicable statutory filing requirement	days prior to or 90 day
CLE V: Effective date, if other than the deffective date is listed, the date must be the of filing.)  If the date inserted in this block does not comment's effective date on the Department of	specific and cannot be more than five business of meet the applicable statutory filing requirement of State's records.	days prior to or 90 day
CLE V: Effective date, if other than the deffective date is listed, the date must be the of filing.)  If the date inserted in this block does not comment's effective date on the Department of	specific and cannot be more than five business of meet the applicable statutory filing requirement	days prior to or 90 day
CLE V: Effective date, if other than the defective date is listed, the date must be to of filing.)  If the date inserted in this block does not cument's effective date on the Department of the	specific and cannot be more than five business of meet the applicable statutory filing requirement of State's records.	member.
CLE V: Effective date, if other than the defective date is listed, the date must be to of filing.)  If the date inserted in this block does not cument's effective date on the Department of the	member or an authorized representative of a recuted in accordance with section 605.0203 (1) (balse information submitted in a document to the Egree felony as provided for in s.817.155, F.S.	member.

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent \$30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)

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

ARTICLE IV-