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Florida Department of State
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Account Name : GRANT, COTTRELL & MILLER-MEYERS, PLLC
Account Number : I20200000034
Phone : (239)649-4848
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J.D.H.
10/5/23

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FLORIDA LIMITED LIABILITY CO.
NAPLES FL RETREAT, LLC

Certificate of Status	1
Certified Copy	0
Page Count	03
Estimated Charge	\$130.00

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

ARTICLE I
NAME

The name of the Limited Liability Company is:

NAPLES FL RETREAT, LLC,

ARTICLE II
ADDRESS

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

Principal Office Address:

6492 Arriba Avenue
Naples, Florida 34113

Mailing Address:

6368 Lyford Isle Drive
Naples, Florida 34113

ARTICLE III
DURATION

The period of duration for the Limited Liability Company shall be indefinite.

ARTICLE IV
MANAGEMENT

The Limited Liability is to be managed by a Managing Members and the names and addresses of such Managing Members is:

WILLIAM L. KILEY, JR., as Co-Trustee of THE WILLIAM KILEY AND STACEY
SCHWIND REVOCABLE TRUST, dated September 23, 2021
6368 Lyford Isle Drive
Naples, Florida 34113

STACEY LYNN SCHWIND, as Co-Trustee of THE WILLIAM KILEY AND STACEY
SCHWIND REVOCABLE TRUST, dated September 23, 2021
6368 Lyford Isle Drive
Naples, Florida 34113

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ARTICLE V
ADMISSION OF ADDITIONAL MEMBERS

Upon unanimous approval by the Member, the Company is authorized to issue additional Units in the Company and to admit Additional Members to the Company.

ARTICLE VI
MEMBERS' RIGHTS TO CONTINUE BUSINESS

The remaining members of the company shall have the right to continue the business on the death, retirement, resignation, expulsion, bankruptcy, or dissolution of a member or the occurrence of any other event which terminated the continued membership of a member in the Limited Liability Company.

ARTICLE VII
REGISTERED AGENT

The name and address of the registered agent is:

WILLIAM L. KILEY, JR.
6368 Lyford Isle Drive
Naples, Florida 34113

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:


WILLIAM L. KILEY, JR.

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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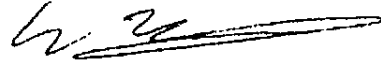
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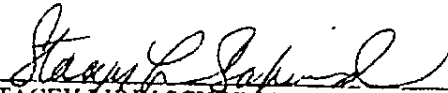
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These Articles are executed this 19th day of September, 2023 by the undersigned Initial Member of NAPLES FL RETREAT, LLC, pursuant to Section 605.0203(1)(b) of the Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.

MANAGING MEMBERS:



WILLIAM L. KILEY, JR., as Co-Trustee of THE
WILLIAM KILEY AND STACEY SCHWIND
REVOCABLE TRUST, dated September 23, 2021



STACEY LYNN SCHWIND, as Co-Trustee of The
WILLIAM KILEY AND STACEY SCHWIND
REVOCABLE TRUST dated September 23, 2021.

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