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CAPITAL CONNECTION, INC.

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NILES DAVIS LLC		
Please Debit FCA000000003 For	: 130	
Thank you Seth Neeley	-	
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Hely		Art of Inc. File
		LTD Partnership File
		Foreign Corp. File
		L.C. File
		Fictitious Name File
		Trade/Service Mark
		Merger File
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		RA Resignation
		Dissolution / Withdrawal
		Annual Report / Reinstatement
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		Corp Record Search
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COVER LETTER

	ew Filing Sectivision of Cor					
SUBJECT	NILES DA	VIS LLC				
BOBULC!		Name of Li	imited Liability Company			
The enclos	ed Articles of	Organization and fee(s) a	are submitted for filing.			
Please retu	rn all correspo	ndence concerning this m	natter to the following:			
	Jason Glaser					
			Name of Person		_	
	JGL RE Hold	lings LLC				
			Firm/Company			
	20900 NE 30	th Ave, Suite 307				
		***	Address			
	Aventura, FI	. 33180				
	Jason@teiicap		City/State and Zip Code		P4	
			d for future annual report notificati	ion)	<u> </u>	,
For further i	nformation cor	cerning this matter, pleas	se call:		21	ω
	Jason Glaser	3 at (305 792-5760	<u>.</u> {`	124 H/	
	Name		Area Code Daytime Telephon	e Number	2024 HAY -2	neau (Teau
Enclosed is	s a check for th	e following amount:		[7]		
□\$125.00	Filing Fee	■\$130.00 Filing Fee & Certificate of Status	& □\$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐\$160.00 Filing F Certificate of Status Certified Copy (additional copy is en	Çć, 9.	Ü
	New Fi Divisio	2 Address ling Section n of Corporations ox 6327	Street Address New Filing Section Di The Centre of Tallaha 2415 N. Monroe Stre	assee		

Tallahassee, FL 32303

Tallahassee, FL 32314

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 - Name: The name of the Limited Liability Company is:	
NILES DAVIS LLC	
(Must contain the words "Limited Liabilit	y Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the principal office of	the Limited Liability Company is:
Principal Office Address:	Mailing Address:
20900 NE 30th Ave	20900 NE 30th Ave
Suite 307	Suite 307
Aventura, FL 33180	Aventura, FL 33180

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: (The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

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

JGL RE HOLDIN	GS LLC	
	Name	
20900 NE 30th Av	re, Suite 307	
Florida street addı	ess (P.O. Box <u>NOT</u> ac	cceptable)
Aventura	FL	33180
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)

(CONTINUED)

" A K 411 D " A	uthorized Member	Name and Address:
"MGR" = Ma		
MGR	6	JGL RE HOLDINGS LLC
		20900 NE 30th Ave, Suite 307
		Aventura, FL 33180
MGR		JES Interests Inc.
		1209 Citrus Isle
		Ft. Lauderdale, Fl. 33315
·	nt if necessary)	date of filing: (OPTIONAL)
LEV: Effective fective date is loffiling.) If the date insert	date, if other than the cisted, the date must be	date of filing:
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\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

\$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)

ARTICLE IV-