



# L020000021588

ACCOUNT NO. : 072100000032

REFERENCE : 713904 5020727

AUTHORIZATION

*Patricia Pigut*

COST LIMIT : \$ 155.00

*8/21 FL UC*

*CC*

ORDER DATE : August 21, 2002

ORDER TIME : 2:23 PM

ORDER NO. : 713904-010

**MJH**

CUSTOMER NO: 5020727

800007255588--3

CUSTOMER: Kurt E. Grosman, Esq  
Kurt E. Grosman, Attorney

5043 Winwood Way

Orlando, FL 32819

DOMESTIC FILING

NAME: THOROUGHBRED, LLC

**FILED**  
02 AUG 21 PM 1:38  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

EFFECTIVE DATE:

☐ ARTICLES OF INCORPORATION  
☐ CERTIFICATE OF LIMITED PARTNERSHIP  
☒ ARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

☒ CERTIFIED COPY  
☐ PLAIN STAMPED COPY  
☐ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Norma Parramore - EXT. 1147

EXAMINER'S INITIALS:

**RECEIVED**  
02 AUG 21 PM 2:51  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

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

**ARTICLE I - Name:**

The name of the Limited Liability Company is:

**THOROUGHbred, LLC.**

**ARTICLE II - Address:**

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

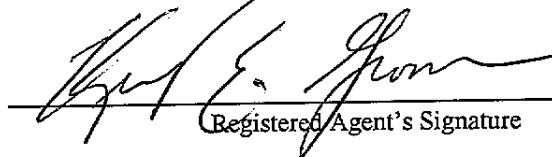
**5043 Winwood Way, Orlando, Florida 32819.**

**ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:**

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

**Kurt E. Grosman  
5043 Winwood Way  
Orlando, Florida 32819.**

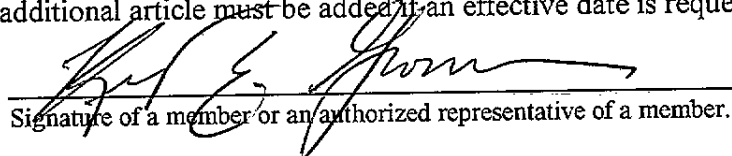
*Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all 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 608, F.S.*

  
Registered Agent's Signature

**ARTICLE IV - Management (Check box if applicable.)**

☒ The Limited Liability Company is to be managed by one manager or more managers and is, therefore, a manager - managed company.

(An additional article must be added if an effective date is requested)

  
Signature of a member or an authorized representative of a member.

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

**Kurt E. Grosman**  
Type or printed name of signee

**FILED**  
02 AUG 21 PM 1:38  
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TALLAHASSEE FLORIDA