

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H07000129225 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this? page. Doing so will generate another cover sheet.

Division of Corporations

Fax Number : (850)205-0383

Account Name : SERVANT INVESTMENTS, LLC

Account Number: I20070000044

: (407)999-7772

Phone

Fax Number

: (407) 999-7759

FLORIDA/FOREIGN LIMITED LIABILITY CO.

Silver Servant, LLC

| Certificate of Status | 0 |
|-----------------------|----------|
| Certified Copy | 0 |
| Page Count | 02 |
| Estimated Charge | \$125.00 |

Electronic Filing Menu

Corporate Filing Menu

Help

(((H07000129225 3)))

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

| Silver Servant, LLC | | |
|--|--|--|
| (Must end with the words "Limited Liability Company, "Limit | ted Company" or their abbreviation "LLC," or "L.C.,") | . : |
| ARTICLE II - Address: The mailing address and street address of the p | rincipal office of the Limited Liability Comp | 9 (N 7/2 () pany is: |
| Principal Office Address: | Mailing Address: | ी पुरस्ताता अधि |
| 135 West Central Boulevard, Suite 1200 Orlando, Florida 32801 | 135 West Central Boulevard, Sulte 1200 Orlando, Florida 32801 | in the second of |
| ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Regist business entity with an active Florida registration.) The name and the Florida street address of the registration. | stered Agent. You must designate an individual or another | |
| N. Dwayne Gray, Jr., Esq Name | | SAN TO P |
| 201 East Pine Street, Street add | uite 500 dress (P.O. Box NOT acceptable) | OF STA |
| Orlando City, State, a | FL 32801 | A is O |

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 Ageny's Signature (REQUIRED)

(CONTINUED) Page 1 of 2

(((H07000129225 3)))

(((H07000129225 3)))

| | Title: "MGR" = Manager "MGRM" = Managing Member | Name and Address: | · |
|--|--|--|---------------------------|
| | MGR | Servant Investments, LLC | |
| | | 135 West Central Boulevard, Sulfe 1200 | - - |
| | | Orlando, Florida 32801 | - |
| • | MGR | The Rocking M LLC | |
| | 1 | 3410 Midcourt Road, Suite 136 | - |
| · | | .Carroliton, TX 75006 | - - |
| कः | to promote the second second second | 198 Jan 198 Jan 198 | - - - |
| To the state of th | The second secon | And the second s | - |
| The second secon | | | - ` : |
| | , <u> </u> | m | |
| e e e e e e e e e e e e e e e e e e e | (Use attachment if necessary) | (et | u antico |
| (If an ei to or 90 | LE V: Effective date, if other than the dat ffective date is listed, the date must be sp days after the date of filing.) REQUIRED SIGNATURE: | e of filing:, (OPTIC secific and cannot be more than five business | MAL) days prior Ass 0 |
| | Signature of a momber or | an authorized representative of a member. | FINAY 10 ECRETARY LAHASSI |
| | (In accordance with section of this document constitutes that the facts stated herein | 1 608.408(3), Florida Statutes, the execution s an affirmation under the penalties of perjury n are true.) | AMII: DI |
| | N. Dwayne Gray, Jr. Typed | or printed name of signer | |
| | Filing Fees: | | |
| | \$125.00 Filing Fee for Articles of Organization of Registered Agent \$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional) | tion and Designation | |

Page 2 of 2