00079347 Division of Corporat Page 1 of 1 Florida Department of State Division of Corporations Public Access System **Electronic Filing Cover Sheet** . . . . . . . . . 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. (((H080001982193))) H080001982193ABC5 Note: DO NOT hit the REFRESH/RELOAD button on your browser from this 08 AUG 20 page. Doing so will generate another cover sheet. construction a substance in the interview of the second second second second second second second second second TO: Division of Corporations Fax Number : (850)617-6383 From: Account Name : C T CORPORATION SYSTEM Account Number : FCA00000023 Phone : (850)222-1092 : (850)878-5926 Fax Number RECEIVED ORIDA/FOREIGN LIMITED LIABILITY CO. **08 AUG 20** Sweet W of Central Florida, LLC J. BRYAN Certificate of Status Û Certified Copy 0 AUG 2 1 2008 Page Count 03 EXAMINER Estimated Charge \$125.00 Electronic Filing Menu Corporate Filing Menu Help

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

## **ARTICLE I - Name:**

The name of the Limited Liability Company is:

 Sweet W of Central Florida, LLC
 (Must end with the words "Limited Liability Company, "Limited Company" or their abbreviation "LLC," or "L.C.,")

 ARTICLE II - Address:
 The mailing address and street address of the principal office of the Limited Liability Company is

 Principal Office Address:
 Mailing Address:

 9457 Lincoln Highway
 9457 Lincoln Highway

 Bedford, PA 15522
 Bedford, PA 15522

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

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

 C T Corporation System Name
1200 South Pinc Island Road
 Florida street address (P.O. Box NOT acceptable
Plantation, Florida 33324

City, State, and 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 608, F.S.

C T Corporation System JAMES M. NEWSOME Special Assistant Secretary stered Agent's Signature (REQUIRE

(CONTINUED) Page 1 of 2 ARTICLE IV- Manager(s) or Managing Member(s): The name and address of each Manager or Managing Member is as follows:

 Title:
 Name and Address:

 "MGRM" = Manager
 Todd E. Bicholberger

 MURM
 Todd E. Bicholberger

 9457 Lincoln Highway
 Bedford, PA 15522

 Bedford, PA 15522
 Image: Address in the second seco

ARTICLE V: Effective date, if other than the date of filing: \_\_\_\_\_\_, (OPTIONAL) (If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

BEQUIRED SIGNATURE:

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 penaltics of perjury that the facts stated herein are true.)

Todd B. Bichelberger

Typed or printed name of signee

Pilling Frees;

5125.00 Filing Fee for Articles of Organization and Designation of Registered Agent 5 30.00 Cartified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)

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FL00. - MOWE C Y System Dailes

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