**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.

(((H09000124751 3)))



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

To:

Division of Corporations

Fax Number : (850) 617-6383

From:

Account Name : SCOTT M. GRANT, P.A.

Account Number : 102603003131 : (239)649-4848

Fax Number ·: (239)643~9810

#### FLORIDA/FOREIGN LIMITED LIABILITY CO.

#### H&D of Naples, LLC

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

J. BRYAN

MAY 2:0 2009

Electronic Filing Menu

Corporate Filing Menu

**TEXAMINER** 

(((H09000124751 3)))

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

# ARTICLE I

The name of the Limited Liability Company is:

H&D OF NAPLES, LLC

ARTICLE II
ADDRESS



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

2640 White Boulevard Naples, FL 34117

## ARTICLE III DURATION

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

## ARTICLE IV MANAGEMENT

The Limited Liability Company is to be managed by Managers and the name and address of such Managers who are to serve as Managers are:

TONY BOWMAN 2640 White Boulevard Naples, FL 34117

TODD HUNTER LANIUS 6075 Kingsport Highway Afton, TN 37616

## ARTICLE V ADMISSION OF ADDITIONAL MEMBERS

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

1

(((H09000124751 3)))

#### 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 terminates the continued membership of a member in the Limited Liability Company.

#### ARTICLE VII REGISTERED AGENT

The name and address of the registered agent is:

Scott M. Grant, Esq. Scott M. Grant, P.A. 3400 Tamiami Trail N., Suite 201 Naples, FL 34103

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, Florida Statutes.

REGISTERED AGENT

Scott M. Grant

These Articles are executed this 40 day of 40, 2009 by the undersigned Initial Member of H&D OF NAPLES, LLC, pursuant to Section 608.408(3) of the Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.

MANAGER:

TONY BOWMAN