

**L10-0000008672**

Florida Department of State  
Division of Corporations  
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From:

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Account Number : I20080000088  
Phone : (407) 423-1183  
Fax Number : (407) 841-6746

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**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN T. CLINE  
A ROLL WITH A HOLE BAGELS, LLC**

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**EXAMINER**

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Email Address: artvisconti@yahoo.com

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**AMENDED ARTICLES OF ORGANIZATION OF**  
**A ROLL WITH A HOLE BAGELS, LLC**

The undersigned, being authorized to execute and file these Articles, hereby certifies that:

**ARTICLE I — Name**

The name of the Limited Liability Company is: A ROLL WITH A HOLE BAGELS, LLC.

**ARTICLE II — Address**

The mailing address and address of the principal office of the Limited Liability Company is:  
7868 W. Irlo Bronson Memorial Highway, Kissimmee, Florida 34747.

**ARTICLE III — Registered Agent, Registered Office**

The name and the street address of the initial registered agent are: Donna L. Draves, 120 East Concord Street, Orlando, Florida 32801.

**ARTICLE IV — Management**

The Limited Liability Company is to be managed by two or more managers and is not a manager-managed company. The names and addresses of the managing members are:

Arthur Visconti, 2920 Sunset Vista Blvd., Kissimmee, FL 34747  
Michele K. Visconti, 2920 Sunset Vista Blvd., Kissimmee, FL 34747


**ARTICLE V — Effective Date; Existence**


This company shall exist perpetually, commencing on January 21<sup>st</sup>, 2010.

**ARTICLE VI — Additional Provisions**

Any Operating Agreement (as defined in Section 608.402(24) of the "Florida Limited Liability Company Act") relating to this Limited Liability Company must be in writing and signed by all of the members.

IN WITNESS WHEREOF, we have signed these Amended Articles of Organization and acknowledge them to be our act this 30th day of March, 2010.

  
Arthur Visconti

  
Michele K. Visconti

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**STATEMENT ACCEPTING APPOINTMENT AS REGISTERED AGENT**

I hereby accept the designation as registered agent to accept service of process for the above stated Limited Liability Company at the place designated in this statement. 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 under Chapter 608, Florida Statutes.

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

**REGISTERED AGENT:**

  
DONNA L. DRAVES, ESQ.

STATE OF FLORIDA  
COUNTY OF ORANGE

I HEREBY CERTIFY that on this day before me, an officer duly authorized in the State of Florida, aforesaid and in the County aforesaid to take acknowledgments, personally appeared Donna L. Draves, personally known to me, and who executed the foregoing Statement Accepting Appointment as Registered Agent and acknowledged before me that she executed the same.

WITNESS my hand and official seal this 30<sup>th</sup> day of March 2010.



DALE E. MACMAHON  
MY COMMISSION # DD 853417  
EXPIRES: March 20, 2013  
Bonded Thru Budget Notary Services



NOTARY PUBLIC, STATE OF FLORIDA

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