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CZS of Naples, LLC

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EXAMINER

(((H10000130092 3)))



ARTICLES OF ORGANIZATION OF CZS OF NAPLES, LLC

The undersigned acting as organizer of CZS OF NAPLES, LLC, under the Florida Limited Liability Company Act, adopts the following Articles of Organization for said limited liability company.

ARTICLE I

The name of the limited liability company shall be CZS OF NAPLES, LLC, (the "Company").

ARTICLE II

This Company shall exist perpetually, unless dissolved according to law or as set forth in any Operating Agreement adopted by the Company.

ARTICLE III PURPOSE

The Company is organized pursuant to the Florida Limited Liability Company Act for the purpose of conducting any lawful activity in Florida, with the powers described in the Florida Limited Liability Company Act and as set forth in any Operating Agreement adopted by the Company.

ARTICLE IV BUSINESS ADDRESS/MAILING ADDRESS

The address of the place of business in this State of the Company shall be 4000 Reflection Court, Naples, Florida 34109. The mailing address of the Company shall be 4000 Reflection Court, Naples, Florida 34109.

Prepared by: Kent A. Skrivan, Esq. Stetler & Skrivan, PL 1421 Pine Ridge Road, Suite 120 Naples, Florida 34109 (239) 597-4500 Bar #0893552

ARTICLE V REGISTERED AGENT

The name and address of the Company's initial registered agent and registered office is Camille Zaino, 4000 Reflection Court, Naples, Florida 34109.

ARTICLE VI ADMISSION OF ADDITIONAL MEMBERS

Additional members may be admitted to the Company upon the consent of and approval of the members and then only upon the condition that a new member be bound by and become a party to any Operating Agreement of the Company.

ARTICLE VII DISSOLUTION, CONTINUATION

The members shall have the right to continue the Company upon the death, retirement, resignation, expulsion, bankruptcy or dissolution of a member or occurrence of any other event which terminates the membership of a member in the Company as provided in any Operating Agreement adopted by the Company.

ARTICLE VIII MANAGEMENT

The Company is to be managed by its members. The name and address of the initial members of the Company are:

Camille Zaino 4000 Reflection Court Naples, Florida 34109

Susanne Zaino 1206 Kingsway Naples, Florida 34104

(((H10000130092 3)))

ARTICLE IX
ADDITIONAL PROVISIONS

The effective date of this limited liability company shall be upon filing.

By: Carrielle Lacis
Camille Zaino, Organizer

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

STATE OF FLORIDA)
COUNTY OF COLLIER) ss.)

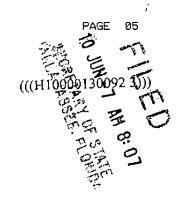
I HEREBY CERTIFY that on this day, before me, a Notary Public duly authorized to take acknowledgments, personally appeared Camille Zaino, to me known to be the person described in and who executed the foregoing Articles of Organization of CZS of Naples, LLC. Camille Zaino is personally known to me or has produced as identification.

WITNESS my hand and official seal in the County and State named above, this 3rd day of ________, 2010.

Moran Public State of Florida
Araismi, # DeFrancesco
Historic School D0853107
Expires 97/21/2013

Notary Public
My Commission Expires:

3



CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/RESISTERED OFFICE

In compliance with Section 608.415, Florida Statutes, the undersigned Limited Liability Company submits the following statement in designating the registered agent/registered office, in the State of Florida:

- 1. The name of the Limited Liability Company is CZS OF NAPLES, LLC
- 2. The name and address of the registered agent and registered office is:

Camille Zaino 4000 Reflection Court Naples, Florida 34109

By: Camelle July
Camille Zaino, Organizer

ACCEPTANCE:

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 relative to the proper and complete performance of my duties and I am familiar with and accept the obligations of my position as registered agent.

CAMILLE ZAINIC