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# FLORIDA LIMITED LIABILITY CO. The Smoother Mover of Orlando LLC

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**EXAMINER** 

7/15/2010

FROM : ED . N. B. KAGAN, P.A.

PHONE NO. : 8132880428

Jul. 16 2010 10:35AM P2

FAX AUDIT NUMBER H10000162296 3

## ARTICLES OF ORGANIZATION

OF

#### THE SMOOTHER MOVER OF ORLANDO LLC

THE UNDERSIGNED, for the purpose of forming a limited liability company pursuant to the provisions of the Florida Limited Liability Company Act, does hereby adopt the foregoing Articles of Organization:

## ARTICLE I - NAME

The name of the limited liability company shall be The Smoother Mover of Orlando LLC.

## ARTICLE II - MAILING ADDRESS

The mailing address and street address of the principal office of the limited liability company is as follows:

10349 Sandy Marsh Lane Orlando, FL 32832

#### ARTICLE III - REGISTERED AGENT

The name and the Florida street address of the initial Registered Agent of the limited liability company is as follows:

Name

Address

Edwin B. Kagan

2709 Rocky Point Drive Suite 102 Tampa, FL 33607

## ARTICLE IV - MANAGEMENT

The limited liability company shall be managed by the following managing member who shall hold the office set forth next to his name:

FAX AUDIT NUMBER H10000162296 3 FROM : EDJ. 1, B, KAGAN, P.A.

PHONE NO. : 8132880428

Jul. 16 2010 10:36AM P3

FAX AUDIT NUMBER H10000162296 3

Name

Joseph Suggs

Office

President

# ARTICLE V - INDEMNIFICATION

The limited liability company shall indemnify its managing members for all liabilities incurred directly, indirectly or incidentally to services performed for the limited liability company, to the fullest extent permitted under Florida law existing now or hereinafter enacted.

IN WITNESS WHEREOF, the undersigned executes these Articles of Organization of The Smoother Mover of Orlando LLC, this day of July, 2010.

STATEMENT ACCEPTING APPOINTMENT AS REGISTERED AGENT

I hereby accept the designation as Registered Agent to accept service of process for The Smoother Mover of Orlando LLC at the place designated in these Articles of Organization. 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.

Edwin B. Kagaz

FAX AUDIT NUMBER