4:33PA Corporations Viray to bus on 000030 No 144 Mar. 7, 2 Û (Division of

Florida Department of State Division of Corporations **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.

(((H130000538693)))



H130000538693ABC2

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

55 From: Carrie Ramos, Paralegal please fax confirmation to 707 Account Name : GRAYROBINSON, P.A. - ORLANDO 244 2 Account Number ; 120010000078 **7** Phone : (407)843-8880 Fax Number : (407)244-5690 \sim $\overline{\mathbb{D}}$

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.



Electronic Filing Menu Corporate Filing Menu

Help

503

MAR

1

; ;,

Mar., 7, 2013 4:34PM Gray Robinson

i

No. 1144 P. 2 H13000053869 3

÷.

AMENDED AND RESTATED ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

CURVE COMMERCIAL SERVICES, LLC (the "Company") filed its original Articles of Organization with the Florida Department of State effective as of March 11, 2011 (the "Original Articles") and was assigned document number L11000030100. These Amended and Restated Articles of Organization were duly adopted by the Company and set were prepared in accordance with Section 608,411, Florida Statutes.

ARTICLE I - Name:

The name of the Limited Liability Company is:

CURVE COMMERCIAL SERVICES, LLC

ARTICLE II - Address:

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

12601 N WINNERS CIRCLE DAVIE, FL 33330

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: The name and the Florida street address of the registered agent are:

> SCOTT L. CAGAN GRAYROBINSON, P.A. 401 E. LAS OLAS BLVD., SUITE 1850 FT. LAUDERDALE, FL 33301

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 dutter, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S.

TERED AGENTS

W2155512 + # 2097321 v1

Nc. i144 P. 3 H13000053869 3

2013 NUR --

7

သူ

N

<u>ب</u> -

• ******

yneu a 9

; ;

Article IV - Manager(s) or Managing Member(s):

The Limited Liability Company is to be managed by one or more managers and is, therefore, a "manager-managed" limited liability company. The name and address of each Manager is as follows:

> <u>Title:</u> MGR

Name and Address: DARYL P. HUDSON 12601 N. WINNERS CIRCLE DAVIE, FL 33330

AUTHORIZED REPRESENTATIVE'S SIGNATURE

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

> DARYLP. HUDSON Typed or printed name of signee

V82 | 553V2 + # 2097321 v1