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Florida Department of State

Division of Corporations **Electronic Filing Cover Sheet**

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From:

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Account Number : 120080000104 Phone : (302) 674-4089

Fax Number

: (302)674-5266

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

Email Address: sterna@crescentheights.com

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN RWG CASH MANAGEMENT, LLC

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JUL 10 2012

ARTICLES OF CORRECTION FOR FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY

Pursuant to section 608.4115, F.S., this document is being submitted within the required 30 business days to correct the attached articles of organization or application to transact business in Florida.

FIRST	The name of the limited liability company is: RWG CASH MANAGMENT, LLC	_		
SECO	ND: The articles of organization or the application to transact business			
<u>(C</u> F	IECK THE APPROPRIATE BOX AND COMPLETE THE APPLICABLE STATEMENT			
\checkmark	Contains an incorrect statement. The incorrect statement, the reason the statement is incorrect, and the corrected statement are as follows: Article IV. Manager: David B. Smith, Martin Kelb, and David Muhirad is incorrect	<u>.</u>		
	because David Muhirad is not a manager.	_		
	The Corrected Article IV. Manager: David B. Smith and Martin Kalb.	-		
		_		
	OR	-		
	Was defectively signed. The manner in which the document was defectively signed and the appropriate correction are as follows:	-		
		.		
Dari	July 9 2012	-		
Dated:	- July 9 - 2012 -			
	Signature of a member or : authorized representative of a member			
	Sharon Christenbury, Authorized Representative	12 JUL		
	Typed or printed name of signee	JUL - 9		
	Filing Fee: \$25.00 Certified Copy: \$30.00 (optional)	-9 AH		
CROFOAS	(08/05)			

H12000155114 -3

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

		npany is:	
RWG Ca	sh Managemen	t, LLC	
-	(Must and with the words "Lin	mind Liability Company, "L.L.C.," or "LLC.")	
ARTICLE II The mailing ac		of the principal office of the Limited Liability Comp	pany is:
Principal Offi	ice Address;	Mailing Address:	
2200 Biscayne	. Davidance and	DOMA DI BILLIONI	*
Miami, FL 331		2200 Biscayne Boulevard Miami, FL 33137	
ARTICLE ID (The Limited Liabil business cartity with	I - Registered Agent, Re lity Company cannot serve as its th an active Florida registration.)	Miami, FL 33137 Egistered Office, & Registered Agent's Signature: own Registered Agent. You must designate an individual or another of the registered agent are:	2012 JUN
ARTICLE ID (The Limited Liabil business cartity with	I - Registered Agent, Relity Company cannot serve as its them active Florida registration.) the Florida street address NRAI Services,	Miami, FL 33137 egistered Office, & Registered Agent's Signature: own Registered Agent. You must designate an individual or another of the registered agent are:	2012 JUN 1 1
ARTICLE IN (The Limited Liabil business cartity with	I - Registered Agent, Relity Company cannot serve as its them active Florida registration.) the Florida street address: NRAI Services, 2731 Executive	Miami, FL 33137 Egistered Office, & Registered Agent's Signature: own Registered Agent. You must designate an individual or another s of the registered agent are: Inc. Name Ve Park Drive, Suite 4	2012 JUN 1 1 AH
ARTICLE ID (The Limited Liabil business cartity with	I - Registered Agent, Relity Company cannot serve as its them active Florida registration.) the Florida street address: NRAI Services, 2731 Executive	Miami, FL 33137 egistered Office, & Registered Agent's Signature: own Registered Agent. You must designate an individual or another of the registered agent are:	2012 JUN 1 1 AH Se

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 stututes relating to the proper and complete performance of my duttes, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S.

Registored Agent's Signature (REQUIRED)

Diane L. Flanagan, Asst. Secretary

(CONTINUED)

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19 III -0 AH 7: 37

ARTICLE IV- Manager(s) or Managing Member(s):
The name and address of each Manager or Managing Member is as follows:

"MGR" = Manager		
"MGRM" = Managing Mcmber		
<u> </u>	Barta B. Aucht	
MGR	David B. Smith	
	2200 Blocayno Boulevard	
	Mixmi, FL 33137	•
MGR	Martin Kalb	
	333 S. E. 2nd Avenue	
	Miami, FL 33131	
MGR	David Muhirad	
	2200 Biscavne Bouleyard	
	Mlami, FL 33137	
(Use attachment if necessary)		ည်း <u>ခ</u>
•		213
LE V: Effective date, if other than th	ne date of filing: (OPTIONAL)	
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CLE V: Effective date, if other than the effective date is listed, the date must of days after the date of filing.)	be specific and cannot be more than five business day	Part Company
TLE V: Effective date, if other than the effective date is listed, the date must of days after the date of filing.) REOUIRED SIGNATURE:	be specific and cannot be more than five business day	Part Company
CLE V: Effective date, if other than the effective date is listed, the date must days after the date of filing.) REOUIRED SIGNATURE: Signature of a member of a	be specific and cannot be more than five business day or or an authorized representative of a member. OB.408(3), Florida Statutes, the execution of this document for the penalties of perjury that the facts stated herein are true. Immilier submitted in a document to the Department of State	Part Company
LE V: Effective date, if other than the flective date is listed, the date must days after the date of filing.) REOUIRED SIGNATURE: Signature of a member of a member of a member day of the constitutes an affirmation and I am aware that any false inforcemental at third degree felor	be specific and cannot be more than five business day ber or an authorized representative of a member. 08.408(3), Florida Statutes, the execution of this document for the penalties of perjury that the facts stated herein are true.	Part Company
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CLE V: Effective date, if other than the effective date is listed, the date must of days after the date of filing.) REOUIRED SIGNATURE: Signature of a member of a material and its an affirmation and its an aware that any false inforcemental at third degree felor of the state of the constitutes a third degree felor of the state of th	be specific and cannot be more than five business day ber or an authorized representative of a member. 08.408(3), Florida Statutes, the exception of this document for the penalties of perjury that the facts stated herein are true, remation submitted in a document to the Department of State my as provided for in s.817.155, F.S.) tenbury, Authorized Representative Typed or printed name of signee	11 AN 80 87

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