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FLORIDA LIMITED LIABILITY CO.
Tony D's of Florida, LLC

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Date: 11/05/2014 02:23:01 PM -0500

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Subject: Tony D's of Florida, LLC

To:	**From:**
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	Email: mstops@incserv.com

Comments:

Melissa A. Stops
Sr. Client Services Representative
Incorporating Services, Ltd.
1540 Glenway Drive
Tallahassee, FL 32301
800.699.9673
850.656.7956 (direct)
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or email _____

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:
The name of the Limited Liability Company is:

Tony D's of Florida, LLC
(Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")

ARTICLE II - Address:
The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:	**Mailing Address:**
3300 NE 32nd Street	Same
Fort Lauderdale, FL 33308	

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:
(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

The name and the Florida street address of the registered agent are:

Paracorp Incorporated
Name

165 Office Plaza Drive, 1st Floor
Florida street address (P.O. Box NOT acceptable)

Tallahassee FL 32301
City Zip

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 duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S.

SEE ATTACHED
Registered Agent's Signature (REQUIRED)

(CONTINUED)

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ARTICLE IV-
The name and address of each person authorized to manage and control the Limited Liability Company:

Title:	Name and Address:
"AMBR" = Authorized Member "MGR" = Manager AMBR/MGR	Chris DeGrazia 80 St. Paul Blvd., Apt. 4G Rochester, NY 14604
AMBR/MGR	Tony DiCesare 80 St. Paul Blvd. Apt. 4H Rochester, NY 14604
AMBR/MGR	John F. Speranza, Jr. 799 North Landing Road Rochester, NY 14625

(Use attachment if necessary)

ARTICLE V: *Effective date, if other than the date of filing:* _____ (OPTIONAL)
(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

ARTICLE VI: Other provisions, if any.

_____

REQUIRED SIGNATURE:

Signature of a member or an authorized representative of a member.
(In accordance with section 605.0203 (1) (b), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)

Michael S. Smith, Authorized Representative
Typed or printed name of signee

Filing Fees:
$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
$ 30.00 Certified Copy (Optional)
$ 5.00 Certificate of Status (Optional)

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STATE OF FLORIDA

REGISTERED AGENT CONSENT FORM

DATE: 11/5/2014

ENTITY NAME: TONY D'S OF FLORIDA, LLC

REGISTERED AGENT NAME AND ADDRESS:

Paracorp Incorporated
155 Office Plaza Drive, 1st Floor
Tallahassee, FL 32301

Paracorp Incorporated, having been designated to act as Statutory Agent, hereby consents to act in that capacity for the above-referenced entity until removed or resignation is submitted in accordance with the Florida Revised Statutes.

Ninh Ho

Ninh Ho, Assistant Secretary
Paracorp Incorporated

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