

L15000076580

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

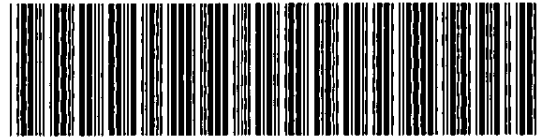
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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RECEIVED
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
15 APR 30 PM 1:53
NOT RECORDED
TO ACKNOWLEDGE
SUFFICIENCY OF FILING

FILED
MAY 01 2015
MAY 01 2015

EFFECTIVE DATE
5/1

MAY 01 2015
S. YOUNG

CORPORATION SERVICE COMPANY
1201 Hays Street
Tallahassee, FL 32301
Phone: 850-558-1500

ACCOUNT NO. : I20000000195

REFERENCE : 612097 7933974

AUTHORIZATION : *Lydia Cohen*

COST LIMIT : \$ 125.00

ORDER DATE : April 30, 2015

ORDER TIME : 12:58 PM

ORDER NO. : 612097-005

CUSTOMER NO: 7933974

DOMESTIC FILING

NAME: CONTINUUMHR OF FLORIDA, LLC

EFFECTIVE DATE:

ARTICLES OF INCORPORATION
CERTIFICATE OF LIMITED PARTNERSHIP
XX ARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
XX PLAIN STAMPED COPY
CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Lydia Cohen - EXT. 62974

EXAMINER'S INITIALS: _____

FILED
MAY 12 2015
12:20

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: ContinuumHR of Florida, LLC
Name of Limited Liability Company

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Gina Mylla

Name of Person

Payroll Made Easy, Inc.

Firm/Company

11691 Gateway Blvd., Ste. 104

Address

Fort Myers, FL 33913

City/State and Zip Code

gina@continuumhr.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Robert L. Sarver II 239 592-9700
at ()
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- \$125.00 Filing Fee
- \$130.00 Filing Fee & Certificate of Status
- \$155.00 Filing Fee & Certified Copy (additional copy is enclosed)
- \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

Mailing Address
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

FILED

PM 12:21

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

ContinuumHR 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:

11691 Gateway Blvd., Ste. 104
Fort Myers, FL 33913

Mailing Address:

11691 Gateway Blvd., Ste. 104
Fort Myers, FL 33913

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:

Corporation Service Company

Name

1201 Hays Street

Florida street address (P.O. Box NOT acceptable)

Tallahassee

FL

32301

City

State

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...

Emily Gray
Registered Agent's Signature (REQUIRED)

Emily Gray
Asst. Vice President

(CONTINUED)

FILED
MAR 21 2021

ARTICLE IV-

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

Title:

"AMBR" = Authorized Member

"MGR" = Manager

AMBR

Name and Address:

Robert L. Sarver II

11691 Gateway Blvd., Ste. 104

Fort Myers, FL 33913

AMBR

Helen I. Sarver

11691 Gateway Blvd., Ste. 104

Fort Myers, FL 33913

AMBR

David C. Smith

11691 Gateway Blvd., Ste. 104

Fort Myers, FL 33913

(Use attachment if necessary)


ARTICLE V: Effective date, if other than the date of filing: 5/1/2015 (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.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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.)

Helen I. Sarver

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)

FILED
APR 30 PM 12:21