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Division of Corporations

Fax Number : (850)617-6383

From: Carrie Ramos, FRP, Paralegal PLEASE FAX CONFIRMATION TO 407 244-5690

Account Name : GRAYROBINSON, P.A. - ORLANDO

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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN MORSE DOMETER BUMGARDNER, LLC

Certificate of Status	0
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Page Count	03
Estimated Charge	\$25.00

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AMENDED AND RESTATED ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

MORSE DOMEIER BUMGARDNER, LLC (the "Company") filed its original Articles of Organization with the Florida Department of State on November 30, 2016 and was assigned document number L16000217180. These Amended and Restated Articles of Organization were duly adopted by the Company and were prepared in accordance with Section 605.0202, Florida Statutes.

ARTICLE I Name

The name of this Limited Liability Company is:

Morse Bumgardner, LLC

ARTICLE II Address

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

2170 West SR 434, Suite 280 Longwood, FL 32779

ARTICLE III Management

This Limited Liability Company is to be managed by one or more managers and is, therefore, a "manager-managed" limited liability company.

ARTICLE IV Board of Managers

This Limited Liability Company shall have one (1) manager. The number of managers may be either increased or decreased from time to time in accordance with the Operating Agreement of this Limited Liability Company, but shall never be fewer than one.

The name and address of the manager of this Limited Liability Company are as follows:

Name

Street Address

Serena Morse

2170 West SR 434, Suite 280 Longwood, FL 32779

ARTICLE V Registered Agent, Registered Office & Registered Agent's Signature

The name and the Florida street address of the Registered Agent of this Limited Liability Company are:

Serena Morse 2170 West SR 434, Suite 280 Longwood, FL 32779

Having been named as registered agent to accept service of process for this limited liability company at the place so designated in these Articles of Organization, the undersigned hereby accepts this appointment and agrees to act in this capacity. The undersigned agrees to comply with the provisions of all statutes relating to the proper and complete performance of its duties and is familiar with and accepts the obligations of the undersigned's position as registered agent, as provided for in Chapter 605, Florida Statutes.

REGISTERED AGENT'S SIGNATURE

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 in Section 817.155, Florida Statutes.

AUTHORIZED REPRESENTATIVE'S SIGNATURE

Serena Morse, Authorized Representative

Type or printed name of signee