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(Requestor's Name)					
(Address)					
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(Cit	ty/State/Zip/Phone	e #)			
PICK-UP	☐ WAIT	MAIL			
(Business Entity Name)					
(Document Number)					
Certified Copies	_ Certificates	s of Status			
Special Instructions to Filing Officer:					

Office Use Only



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2014 DEC -1 PM 3: 58

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FLORIDA DEPARTMENT OF STATE Division of Corporations

November 17, 2014

MATTHEW WEST 6500 HOLLISTER AVE, STE 210 SANTA BARBARA, CA 93117

SUBJECT: NETWORK HARDWARE RESALE LLC

Ref. Number: M13000000655

We have received your document for NETWORK HARDWARE RESALE_LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please accept our apology for failing to mention this in our previous letter.

The above listed entity was administratively dissolved or its certificate of authority was revoked for failure to file an annual report with our office. Therefore the document you submitted cannot be filed until the entity is reinstated on records. The required reinstatement application, which takes the place of the annual report(s) due, must be submitted online at www.sunbiz.org. Simply click on the blue box entitled "File A Reinstatement Here!," which is located in the middle of our home page.

Once the reinstatement is submitted online, our system will allow you to choose one of three payment options. The three payment options are: 1. online by credit card; 2. online by pre-established Sunbiz E-File account; or 3. by mail with a check or money order. To pay online using a credit card, simply select the credit card option and enter your credit card information. Business entities with pre-established Sunbiz E-File accounts may choose the Sunbiz E-File account option. Entities paying by check or money order must select the check payment option, print the required payment voucher, and mail the check payment voucher with a check or money order made payable to the Florida Department of State for the total amount due.

If you choose to pay the required reinstatement fee(s) online using a credit card or Sunbiz E-File account, please contact me when the reinstatement filing has posted. If you choose to pay the required fee(s) by check or money order, please mail the check payment voucher and check or money order to my attention.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call

(850) 245-6051.

-Deborah Bruce Regulatory Specialist II

Letter Number: 014A00024393

2014 DEC -1 PM 3: 58

www.sunbiz.org

Division of Cornerations DO ROY 6397 Tellahorsee Florida 29214



FLORIDA DEPARTMENT OF STATE Division of Corporations

September 18, 2014

MATTHEW WEST 6500 HOLLISTER AVE, STE 210 SANTA BARBARA, CA 93117

SUBJECT: NETWORK HARDWARE RESALE LLC

Ref. Number: M13000000655

We have received your document for NETWORK HARDWARE RESALE and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of your limited liability company is not available in the state of Florida since it is the same as, or it is not distinguishable from the name of an existing entity on our records. Therefore, the limited liability company must select an alternate name for use in the state of Florida.

Please insert the alternate name in the space provided on the application form.

The alternate name must contain the words "Limited Liability Company," the abbreviation "L.L.C.," or the designation "LLC." The following suffixes are no longer acceptable: "Limited Company," "L.C.," and "LC". The abbreviations "Ltd." and "Co.", also are no longer acceptable.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Deborah Bruce Regulatory Specialist II

Letter Number: 314A00020026

www.sunbiz.org

Division of Corporations - P.O. BOX 6327 - Tallahassee, Florida 32314

COVER LETTER

Ŕegistration Section

CR2E055 (12/13)

Division of Corporations Network Hardware Resale LLC SUBJECT: Name of Foreign Limited Liability Company Dear Sir or Madam: The enclosed application, certificate and fee(s) are submitted for filing. Please return all correspondence concerning this matter to the following: **MATTHEW WEST** Name of Person CURVATURE LLC (fka Network Hardware Resale LLC) Firm/Company 6500 HOLLISTER AVE, STE 210 Address SANTA BARBARA, CA 93117 City/State and Zip Code tax@curvature.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Matthew West Name of Person Area Code & Daytime Telephone Number STREET/COURIER ADDRESS: MAILING ADDRESS: Registration Section Registration Section Division of Corporations Division of Corporations P.O. Box 6327 Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32314 Tallahassee, Florida 32301 Enclosed is a check for the following amount: □ \$55 Filing Fee & □ \$60 Filing Fee, ■ \$25 Filing Fee □ \$30 Filing Fee & Certificate of Status & Certificate of Status Certified Copy Certified Copy

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY TO FILE AMENDMENT TO CERTIFICATE OF AUTHORITY TO TRANSACT BUSINESS IN FLORIDA

SECTION I (1-3 must be completed)

Name of limited liability Company as it appears on the records of the Florida Department of State: NETWORK HARDWARE RESALE LLC						
2.	2. Jurisdiction of its organization: CA					
3.	Date authorized to do business in Florida: 9/1/	/2012				
SE	ECTION II (4-7 complete only the applicable	e changes)				
		CURVATURE LLC				
7.	new name of the finned habitity company.	nust contain "Limited Liability Company, " "L.L.C. or "L.G.")				
	Curvature Solutions LLC	ed for the purpose of transacting busing@in				
If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written consent of the managers or managing members adopting the alternate name. The alternate name must contain "Limited Liability Company," "L.L." or "LLC.") 5. If the amendment changes the jurisdiction of organization, indicate new jurisdiction:						
	If the amendment changes person, title or capa that change:	acity in accordance with 605.0902 (1)(e), indicate				
7. Attached is an original certificate, if required: no more than 90 days old, evidencing the aforementioned amendment(s), duly authenticated by the official having custody of records in the jurisdiction under the law of which this entity is organized. Signature of the authorized representative						
	MATTHEW WEST					
	Typed or prin	nted name of signee				

Filing Fee: \$25.00

LLC-2

Amendment to Articles of Organization of a Limited Liability Company (LLC)

To change Information of record for your California LLC, you can fill out this form, and submit for filing along with:

- A \$30 filing fee.
- A separate, non-refundable \$15 service fee also must be included, if you drop off the completed form.
- To file this form, the status of your LLC must be active on the records of the California Secretary of State, or if suspended, this form can only be filed to list a new LLC name. To check the status of the LLC, go to kepler.sos.ca.gov.

Importanti To change the LLC addresses, or to change the name or address of the LLC's agent for service of process, you must file a Statement of Information (Form LLC-12). To get Form LLC-12, go to www.sos.ca.gov/business/be/statements.htm.

EFFECTIVE DATE

7/15/14

KLIPAA

FILED
Secretary of State
State of California

JUN 3 D 2014

	1 .	
Items 4-6: Only fill out the information that is changing. Attach pages if you need more space or need to include any other matter	extra (CC	This Space For Office Use Only
For questions about this form, go to www.so	s.ca.gov/busine	ss/be/filing-tips.htm
① LLC's Exact Name (on file with CA Secretary of State)	② LLC	File No. (Issued by CA Secretary of State)
Network Hardware Resale LLC	20011	3810036
Purpose		
 The purpose of the limited liability company is to engage in company may be organized under the California Revised Unit New LLC Name (List the proposed LLC name exactly as it is to appear on the Curvature LLC 	form Limited Lia	ibility Company Act.
Proposed LLC Name The proposed new name must i	lability Company: a	Limited Liability Company, Limited Liability and may not include: bank, trust, trustee, asurance company.
Management (Check only one.)		
The LLC will be managed by:		
One Manager More Than One Manager	All Limited I	iability Company Member(s)
Amendment to Text of the Articles of Organization (List both the	current text, and the	e text as amended by this filing.)
6		
		• ,
Read and sign below: Unless a greater number is provided for in the A one manager, if the LLC is manager-managed or at least one member, if the L is a trust or another entity, go to www.sos.ca.gov/bus/feas/be/filing-tips.htm (pages that are 1-sided and on standard letter-sized paper (8 1/2" x 11"). All at	LC is member-mail for more information	naged. If the signing manager or member in. If you need more space, attach extra
		President of New NHR
Michael She	Idon	Holdings, LLC, sole Manager
Sign here Print	our name here	Your business title
Make check/money order payable to: Secretary of State	By Mail	Drop-Off
Upon filing, we will return one (1) uncertified copy of your filed document for free, and will certify the copy upon request and Business Er	oretary of State htities, P.O. Box 94	Secretary of State 14228 1500 11th Street., 3rd Floor
payment of a \$5 certification fee. Sacrame	nto, CA 94244-22	80 Sacramento, CA 95814

Corporations Code §§ 17701.08, 17702.02, 17713.10 LLC-2 (REV 01/2014) 2014 Callfornia Secretary of State www.sos.ca.gov/business/be The Amendment to Articles of Organization of the Limited Liability Company will have an effective date of July 15, 2014.

no save date (documênt not saved)

200113810036

I hereby certify that the foregoing transcript of _______ page(s) is a full, true and correct copy of the original record in the custody of the California Secretary of State's office.

JUL 01 2014

Date: Ph

DEBRA BOWEN, Secretary of State

CURVATURE LLC

WRITTEN CONSENT

OF THE

MANAGER

November 11, 2014

THE UNDERSIGNED, being the manager of CURVATURE LLC (the "Manager"), a California limited liability company (the "Company"), acting without a meeting pursuant to the Amended and Restated Limited Liability Company Agreement of the Company and Section 17704.07(n) of the California Revised Uniform Limited Liability Company Act (the "Act"), does hereby consent to the adoption of the following resolutions and the taking of the following actions:

WHEREAS, it is proposed that the Company adopt "Curvature Solutions LLC" as an alternative name under which to conduct business in the State of Florida because "Curvature LLC" is not currently available for use.

NOW, THEREFORE, IT IS RESOLVED, that the Member hereby authorizes and approves the use of "Curvature Solutions LLC" as an alternative name under which the Company may conduct business in the State of Florida.

IN WITNESS WHEREOF, the undersigned has executed this consent effective as of the date first written above.

NEW NHR HOLDINGS LLC

Name: Michael Sheldon

Title: President and Chief Executive Officer