

Florida Department of State Division of Corporations

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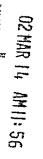
DIVISION OF CORPORATION

# LIMITED LIABILITY COMPANY

LINTOM HOLDINGS, LLC

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$125.00





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#### ARTICLES OF ORGANIZATION

#### OF

### LINTOM HOLDINGS, LLC

The undersigned does hereby subscribe to, acknowledge and file the following Articles of Organization for the purpose of creating a limited liability company under the laws of the State of Florida.

#### ARTICLE I

The name of this limited liability company shall be: LINTOM HOLDINGS, LLC.

#### ARTICLE II

The mailing address and street address of the principal office of the limited liability company shall be 741 Buttonwood Lane, Miami, Florida, 33137, with the privilege of having its offices and branch offices at other places within or without the State of Florida.

#### ARTICLE III

The initial registered office of this limited liability company is 741 Buttonwood Lane, Miami, Florida, 33137. The initial registered agent at that address is Thomas H. Meyer.

#### ARTICLE IV

The limited liability company will be a manager-managed company.

IN WITNESS WHEREOF, the undersigned has executed these Articles of Organization this 13 day of 100 at 2002.

Thomas H. Meyer, Manager

Fax Audit Number:

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SECRETALLY OF STATE ALLAHASSEE, FLORIDA

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# CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of section 608.415, Florida Statutes, the undersigned limited liability company submits the following statement in designating the registered office/registered agent, in the State of Florida.

FIRST -- The name of the limited liability company is LINTOM HOLDINGS, LLC.

SECOND -- The name and address of the registered agent and office is:

Thomas H. Meyer 741 Buttonwood Lane Miami, Florida 33137 02 MAR

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.

Dated this 13 day of March, 2002.

Thomas H. Meyer, Registered Agent

Fax Audit Number:

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SECRETARY OF STATE TALLAHASSEE, FLORIDA