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2002 JUL -1 PM 2:47  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

**TRANSMITTAL LETTER**

Department of State  
Division of Corporations  
P. O. Box 6327  
Tallahassee, FL 32314

700006124847--5  
-07/01/02--01064--006  
\*\*\*\*125.00 \*\*\*\*125.00

**SUBJECT:**  
**Lombardo Concotta, LLC**

Enclosed are an original and one (1) copy of the articles of incorporation and a check for:  
\$125.00  
Filing Fee

**FROM:**  
Enrique Nowogrodzki, CPA  
19468 NW 14 Street  
Pembroke Pines, FL 33029  
305-592-4848 ext 335

**NOTE: Please provide the original and one copy of the articles.**

J. BRYAN JUL - 2 2002

**ARTICLES OF ORGANIZATION**  
**OF**  
**LOMBARDO CINCOTTA, LLC**

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Pursuant to s. 608.407, Florida Statutes, the articles of organization must set forth the following:

**ARTICLE I:**  
**NAME**

The name of the limited liability company is:  
Lombardo Cincotta, LLC.

**ARTICLE II:**  
**ADDRESS**

The mailing address and the street address of the principal office of the limited liability company is:  
12163 SW 102<sup>nd</sup>. Street, Miami, FL 33166-2657.

**ARTICLE III:**  
**REGISTERED AGENT, REGISTERED OFFICE, & REGISTERED AGENT'S SIGNATURE**

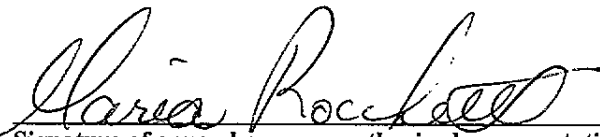
The name and the Florida street address of the registered agent are:  
Maria Rocchetti,  
12163 SW 102<sup>nd</sup>. Street,  
Miami, FL 33166-2657.

*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 608, F.S.*

 6/26/02  
Registered Agent's Signature

**ARTICLE IV:  
MANAGEMENT**

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

 6/26/02

**Signature of a member or an authorized representative of a member.**  
(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

Maria Rocchetti

\_\_\_\_\_  
Typed or printed name of signee

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