

LO2000031176

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

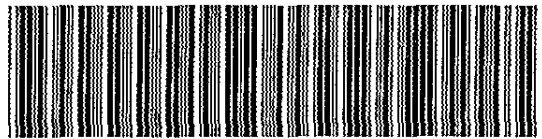
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

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02 NOV 20 AM 8:56
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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131

L. PATRICIA HERNANDEZ
6423 Collins Avenue, #1103
Miami Beach, Florida 33141
Telephone: (305) 490-6933

November 18, 2002

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

Re: Articles of Organization –
LUPHA Interiors, LLC

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

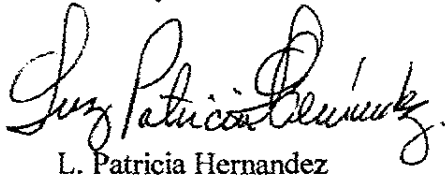
Gentlemen:

Attached please find my check in the amount of \$130.00 for the above Articles of Organization, which includes:

\$100.00 - Filing Articles of Organization
\$ 25.00 - Designation of Registered Agent
\$ 5.00 - Certificate of Status

I may be reached at the above number should you need to reach me.

Sincerely,


L. Patricia Hernandez

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

LUPHA Interiors, LLC

ARTICLE II - Address:

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

6423 Collins Avenue, #1103, Miami Beach, FL 33141

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

The name and the Florida street address of the registered agent are:

Timothy C. Lincoln, Esq.

Name

5601 North Dixie Highway, Suite 411

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

Ft. Lauderdale, FL 33334

City, State, and Zip

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TALLAHASSEE, FLORIDA

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.

Timothy C. Lincoln
Timothy C. Lincoln
Registered Agent's Signature

(An additional article must be added if an effective date is requested)

L. Patricia Hernandez
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.)

L. Patricia Hernandez

Typed or printed name of signer

Filing Fees:

\$100.00 Filing Fee for Articles of Organization

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)