## **LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)**

## FILED Apr 27, 2004 8:00 am Secretary of State

DOCUMENT # 20300014454						04-27-2004 90019 050 ****50.00			
LNL Investm	ents IIC		L						
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		and the second	G W W	, .	_			•	
2. Principal Place of Business 242 Deerfield Ridge Drive		3. Mailing Address	3. Mailing Address			_			
Suite, Apt. #, etc		Suite, Apt. #, etc.			DO NOT WRITE IN THIS SPACE				
·					A FEIAL				
City & State  Mystic, CT		City & State			4. FEI Number 47-0916695			Applied For Not Applicable	
Zip Country		Zip	Country		5 Certificate of Status Desired \$5.0			.00 Additional	
06355-1166			7	7. Name and Address of Current Registered Agent					
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			Cit	у			FL	Zip Code	
		iliar with, and accept the	e obligation	s of registe	red agent.		. ·	:	
	Signature, typed or pri	nted name of registered	l agent and	title if appl	icable.		<u>C</u>	DATE	
	· · · · · · · · · · · · · · · · · · ·	Make Chec	FEE IS \$50 k Payable to D DUE BY M.	epartment of	State				
9.	MANAGING MEMBER	RS/MANAGERS							
TITLE	Partner		TITLE				* * * * * * * * * * * * * * * * * * * *	(X) (X)	
NAME	Noel Gonzalez	Duti	NAME						
STREET ADDRESS CITY-ST-ZIP	242 Deerfield Ridge D Mystic, CT 06355	orive .	STREET ADD	IKE65				i i	
TITLE	Partner		TITLE		<del>, , , , , , , , , , , , , , , , , , , </del>	<del></del>	THE RESERVE OF THE PERSON NAMED IN COLUMN TWO IN COLUMN TO THE PERSON NAMED IN COLUMN TO THE PER	<u> </u>	
NAME	Liza Gonzalez		NAME			gradient	· · · · ·		
STREET ADDRESS	242 Deerfield Ridge I	Orive	STREET ADI	RESS	y			V	
CITY-ST-ZIP	Mystic, CT 06355		CITY-ST-ZIP				· · · · · · · · · · · · · · · · · · ·		
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CITY-ST-ZIP			CITY-ST-ZIP		:	DO NOT	WRITI	Mary Company	
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CITY-ST-ZIP	a de la company.	· · · · · · · · · · · · · · · · · · ·	CITY-ST-ZIP				1,4		
11. I hereby ce	ertify that the information supplied indicated on this report is true	ed with this filing does not qual and accurate and that my sign	lify for the exen	nption stated in e the same le	n Section 119 gal effect as i	.07(3)(i), Florida Sta f made under oath; t	tutes. I further nat I am a mar	certify that the naging member	

or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

4/15/2004

860-572-4495

Date

Daytime Phone #