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To

Division of Corporations

Fax Number : (850)205-0383

Prom:

Account Name : SIEGELAUB, LIEBERMAN & ASSOCIATES, P.A.

Account Number : I19990000058
Phone : (954)753-6042
Fax Number : (954)753-1123

# LIMITED LIABILITY COMPANY

#### L & LR LLC

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### Article I

The name of the Limited Company is:

# L & LR LLC

## Article II

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

5816 Saddle Trail Lane Lake Worth, Fl 33467

## Article III

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

Lisa Taylor 5816 Saddle Trail Lane Lake Worth, Fl 33467

Siegelaub, Lieberman & Associates, P.A. 9690 W. Sample Rd., Suite 202 Coral Springs, Florida 33065 Ph: (954) 753-2222 Fax (954) 753-1123

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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.

Registered Agent's Signature

Article IV - Management (Check box if applicable.)

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

signature of a member or an authorized representative of a member

Lisa Taylor

Typed or printed name of signee