

L04000020275

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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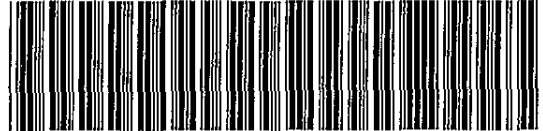
(Business Entity Name)

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TALLAHASSEE, FLORIDA

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J. BRYAN MAR 17 2004



CORPORATION SERVICE COMPANY™

ACCOUNT NO. : 072100000032

REFERENCE : 500771 3487A

AUTHORIZATION :

COST LIMIT : \$ 155.00

ORDER DATE : March 16, 2004

ORDER TIME : 3:17 PM

ORDER NO. : 500771-005

CUSTOMER NO: 3487A

CUSTOMER: Bonnie Quigley
Icard Merrill Cullis Timm
Furen & Ginsburg, Pa
Suite 600
2033 Main Street
Sarasota, FL 34237

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DOMESTIC FILING

NAME: LULU-LEONA, LLC

EFFECTIVE DATE:

ARTICLES OF INCORPORATION
CERTIFICATE OF LIMITED PARTNERSHIP
XX ARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX CERTIFIED COPY
PLAIN STAMPED COPY
CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Troy Todd - EXT. 2940

EXAMINER'S INITIALS: _____

ARTICLES OF ORGANIZATION
FOR
FLORIDA LIMITED LIABILITY COMPANY

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TALLAHASSEE, FLORIDA

ARTICLE I - Name:

The name of the Limited Liability Company is:

LULU-LEONA, LLC

ARTICLE II - Address:

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

Principal Office Address:

4 FLINTLOCK RIDGE ROAD

KATONAH, NEW YORK 10536-2508

Mailing Address:

4 FLINTLOCK RIDGE ROAD

KATONAH, NEW YORK 10536-2508

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

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

RICHARD S. WEBB, IV

Name

2033 MAIN STREET, SUITE 600

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

SARASOTA

FLORIDA 34237

City, State, and Zip

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, Florida Statutes..



Registered Agent's Signature

ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

Title:

"MGR" = Manager

"MGRM" = Managing Member

Name and Address:

MGR

LAURENCE LUCKINBILL
4 FLINTLOCK RIDGE ROAD
KATONAH, NEW YORK 10536-2508

MGR

LUCIE ARNAZ LUCKINBILL
4 FLINTLOCK RIDGE ROAD
KATONAH, NEW YORK 10536-2508

(Use attachment if necessary)

NOTE: An additional article must be added if an effective date is requested.

REQUIRED SIGNATURE:


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.)

LAURENCE LUCKINBILL, MANAGER

Typed or printed name of signee

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)

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