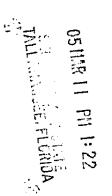
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Office Use Only



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TRANSMITTAL LETTER

TO:	Registration Section Division of Corporations
SUBJE	CT: LynCo Holdings, L.L.C. (Name of Limited Liability Company)
The end	losed Articles of Organization and fee(s) are submitted for filing.
Please r	eturn all correspondence concerning this matter to the following:
	Qun K. Stevens (Name of Person)
	(Name of Person)
	(Firm/Company)
	16846 121 st Terrace North
	(Address)
	Jupiter FL 33478
	(City/State and Zip Code)
For furt	her information concerning this matter, please call:
(Dun K. Stevens at (561, 575-5151
Enclose	her information concerning this matter, please call: Dun K. Stevens
□ \$125	00 Filing Fee \$\Bigcup \text{\$130.00 Filing Fee & }\Bigcup \text{\$155.00 Filing Fee & }\Bigcup \text{\$160.00 Filing Fee,} \\ \text{Certificate of Status & Box (additional copy is enclosed)} \\ \text{Certified Copy (additional copy is enclosed)} \\ Certified Copy (additional copy
	STREET ADDRESS: MAILING ADDRESS: Registration Section Registration Section
	Division of Corporations 409 E. Gaines Street P.O. Box 6327
	Tallahassee, Florida 32399 Tallahassee, Florida 32314

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name	* *			
The name of the Limi	ted Liability Comp	pany is:		
Lyn	Co Holdir	igs, L	L.L.C.	
ARTICLE II - Addr The mailing address		of the pri	ncipal office of the Lim	nited Liability Company is:
Principal Office Add	<u>lress:</u>		Mailing Address:	
16846 121 ⁵⁷ Jupiter FL 33	Terrace North	<u> </u>	16846 121" Tes Jupiter, PL 334	race North
_	-		Office, & Registered	Agent's Signature:
The name and the Flo				
_	<u>Quin</u>	<u>K. 37</u>	evens	-
		Name		
	16846	12157	Terrace North	
	Florida	street addi	ress (P.O. Box NOT accepta	ible)
	Jup	rter	FI 33478	5 £ }
_	Ćit	y, State, ai	FL 33478 nd Zip	7ALL 95
liability company registered agent and statutes relating to	at the place design agree to act in this the proper and comtions of my position	ated in the capacity aplete per as regis.	his certificate, I hereby a c. I further agree to comp rformance of my duties, c	for the above stated limited accept the appointment as ply with the provisions of all and I am familiar with and for in Chapter 608, F.S

(CONTINUED)

Page 1 of 2

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

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.)
Quin K. Stevens

Typed or printed name of signee

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

- \$ 30.00 Certified Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)