lorida Department of State

Division of Corporations Public Access System

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H05000230114 3)))

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

Division of Corporations Fax Number : (850)205-0383

From:

To:

1

DIVISION OF COPPORATION SEP 28 Account Name : EMPIRE CORPORATE KIT COMPANY AH 10: 57 Account Number : 072450003255 Phone : (305)634-3694 Fax Number : (305)633-9696

LIMITED LIABILITY COMPANY

the lincoln group, llc Certificate of Status 0 Certified Copy 1 Page Count 03 Estimated Charge \$155.00

nic Filing Menu.

Componate Filing.

Rublic A

EMPIRE

2005 SEP 28

M

œ

S

S

m

 \sim

T K

m

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

THE LINCOLN GROUP, LLC

(Must end with the words "Limited Liability Company, "Limited Company" or their abbreviation "LLC," or "L.C.,")

ARTICLE II - Address:

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

Principal Office Address:

Mailing Address:

4779 Collins Avenue, #2107 Miami Beach, Florida 33140 4779 Collins Avenue, #2107 Miami Beach, Fiorida 33140

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

(The Limited Lizhility Company cannot serve as us own Registered Agent. You must designate an individual or another business ontity with an active Florida registration.)

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

Ernesto Arguello				
Name		Ās	20	
4779 Collins Avenue, #2107		LLA	2005 S	
Florida street address (P.O. Box NOT acceptable)		2277	Ē	1
Miami Beach	FL 33140	TARY ASSE	28	(*****
City, State, and Zip		F.O.		T

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.



Σจ.จื ⊿คтот

HUJUUDOUIM

ARTICLE IV- Manager(s) or Managing Member(s): The name and address of each Manager or Managing Member is as follows:

<u>Title:</u> "MGR" = Manager	Name and Address:
"MGRM" = Managing Member	
MGRM	Ernesto Arguello
;	4779 Collins Avenue, #2107
1	Miami Beach, Florida 33140
	· · · · · · · · · · · · · · · · · · ·
;	
:	

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: ______. (OPTIONAL) (If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)



Ξ