

L080000010571

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

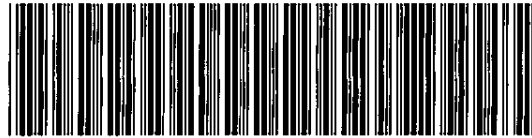
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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01/30/08--01003--019 **155.00

RECEIVED
08 JAN 30 AM 11:16
DEPT. OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

EFFECTIVE DATE 1/24/08

B. KOHR

JAN 30 2008

EXAMINER

FILED
08 JAN 30 PM 2:12
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

LAZARUS

CORPORATE FILING SERVICE
3320 SW 87TH AVENUE
MIAMI, FL 33165
305-552-5973

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1. LAMB & BORGHINI PROJECTS, LLC
(Corporation Name) (Document #)

2. _____
(Corporation Name) (Document #)

3. _____
(Corporation Name) (Document #)

4. _____
(Corporation Name) (Document #)

EFFECTIVE DATE 1/22/08

☒ Walk in

☐ Mail out

☒ Pick up time 2:00

☐ Will wait

☐ Photocopy

☒ Certified Copy

☐ Certificate of Status

NEW FILINGS

☐ Profit

☐ Not for Profit

☒ Limited Liability

☐ Domestication

☐ Other

AMENDMENTS

☐ Amendment

☐ Resignation of R.A., Officer/Director

☐ Change of Registered Agent

☐ Dissolution/Withdrawal

☐ Merger

OTHER FILINGS

☐ Annual Report

☐ Fictitious Name

REGISTRATION/QUALIFICATION

☐ Foreign

☐ Limited Partnership

☐ Reinstatement

☐ Trademark

☐ Other

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TALLAHASSEE, FLORIDA

Examiner's Initials

ARTICLES OF ORGANIZATION- FLORIDA LIMITED LIABILITY COMPANY

Article I – Name:

Lamb & Borghini Projects, LLC

Article II – Address:

EFFECTIVE DATE 1/22/08

Principal Office Address:

1116 Pointe Newport Terrace. #204
Casselberry, FL 32707

Mailing Address:

1116 Pointe Newport Terrace. #204
Casselberry, FL 32707

Article III - Registered Agent:

Christian Borghini
1116 Pointe Newport Terrace. #204
Casselberry, FL 32707

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

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SECRETARY OF STATE

Article IV – Manager(s) or Managing Member(s):

Title:

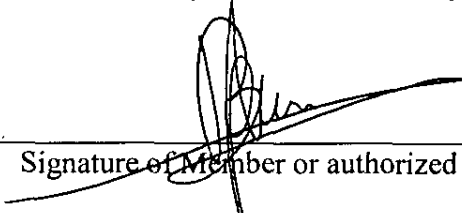
Manager

Name and Address:

Christian Borghini
1116 Pointe Newport Terrace. #204
Casselberry, FL 32707

Article V – Effective Date:

The effective date of operation for this company will be: January ^{22nd}~~15th~~, 2008



Signature of Member or authorized representative.

(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 here are true)