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SECRETARY OF STATE
TALLAHASSEF F STATE

A. LUNT
JAN 81 2008
EXAMINER



January 8, 2008

CYNTHIA NAVARRO P.O. BOX 4511 MIAMI LAKES, FL 33014-4511

SUBJECT: CLN GROUP, LLC Ref. Number: W08000001068

We have received your document for CLN GROUP, LLC and your totaling \$155.00. However, the enclosed document has not been filed and being returned for the following correction(s):

Florida law requires the street address of the principal office and, if different the mailing address of the entity. A post office box is not acceptable for the principal office.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6094.

Agnes Lunt Regulatory Specialist II

Letter Number: 508A00001558

COVER LETTER

TO:	Registration S Division of Co							
SUBJ	ECT. CL	N Group, LLC						
SUBJ	ECI:		ted Liability Compa	iny)				
The en	alagad Artialag a	f Organization and Sec(s) and	and and for filling	_				
		f Organization and fee(s) are	•					
Piease	return all corresp	ondence concerning this mat	ter to the following:					
	Cynthia N	avarro						
			(Name of Person)					
	CLN Grou	ıp, LLC						
			(Firm/Company)					
	P.O. Box	4511						
			(Address)					
	Miami Lak	ces, Florida 33014	4-4511			SE	200	
		(Ci	ty/State and Zip Code)		<u></u>	¥	
For five	ther information	concerning this matter, pleas	م ممال			TAR)	JAN 30	
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Cyn	thia Navari		_at (305)	788-224	`	ST.	<i>∴</i>	C
	(Name	of Person)	(Area Code	& Daytime Tele	phone Numb		20	
Enclos	sed is a check for	or the following amount:						
\$125.	.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	\$155.00 Filing Certified Cop (additional copy	y ·	\$160.00 F Certificate Certified (additional of	e of Sta Copy	tus &	
		Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Registration Division of Clifton Bu 2661 Exec	of Corporations				

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

CLN Group, LLC	
(Must end with the words "Lir	nited Liability Company, "L.L.C.," or "LLC.")
ARTICLE II - Address:	
	of the principal office of the Limited Liability Company is:
ARTICLE II - Address: The mailing address and street address Principal Office Address:	of the principal office of the Limited Liability Company is: Mailing Address:
The mailing address and street address	

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

Cynthia Navarro

business entity with an active Florida registration.)

Name

15845 West Prestwick Place

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

Miami Lakes, Florida 33014

City, State, and Zip

2000 JAN 30 P 2: 20
SECRETARY OF STATE
AND ANASSEF, FLORIDA

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..

egistered Agent's Signature (REOUIRED)

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 "MGRM" = Managing Member	Name and Address:		
President	Cynthia Navarro		
	P.O. Box 4511		
	Miami Lakes, FI 33014-4511		
MGR	Louis I. Navarro		
	P.O. Box 4511		
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(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: <u>January 3, 2008</u>. (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.)

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.)

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)