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# **COVER LETTER**

TO:	Registration Section Division of Corporations		
SUBJE	ECT: EquityLock Holdings,	LLC ited Liability Company	_
The end	closed Articles of Organization and fee(s) are	e submitted for filing.	
Please	return all correspondence concerning this ma	tter to the following:	20
	Alicia Nutterfield		<u> </u>
	Aegis Council, LLC	Name of Person	2011 HAR 30 /
-	<u> </u>	Firm/Company	
	155 Cadillac Place		<u>.</u>
•		Address	
F	Reno, NV 89509		
		ity/State and Zip Code	
<u>-</u>	alicia@aegiscouncil.com E-mail address: (to be used	for future annual report notification)	
For furt	her information concerning this matter, pleas	se call:	
Alicia	Nutterfield	at (775 ) 331-0404	
	Name of Person	Area Code & Daytime Telephone Number	_
Enclos	ed is a check for the following amount:		
\$125.00	Filing Fee \$\int_\$130.00 Filing Fee & Certificate of Status	\$155.00 Filing Fee & \$160.00 Filing Certified Copy (additional copy is enclosed)  \$160.00 Filing Certificate of S Certified Copy (additional copy is	Status &
	Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street/Courier Address Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle	

Tallahassee, FL 32301

### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICL	3 I -	Name:
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The name of the Limited Liability Company is:

# EquityLock Holdings, LLC

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

### ARTICLE II - Address:

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

### **Principal Office Address:**

Mailing Address:

14300 S.W. 129th Street Ste. 202

Miami, FL 33186

14300 S.W. 129th Street Ste. 202 Miami, FL 33186

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

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

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

Emilio Lopez Jr.

Name

14300 S.W. 129th Street Ste. 202

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

Miami

., 33186

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, F.S..

Registered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

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

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

/IGR		Lopez Asset Management Group, LLC
MGK	<del></del>	14300 S.W. 129th St., Ste. 202
		Miami, FL 33186
		(1) The control of th
		75 - 5 - 15 - 15 - 15 - 15 - 15 - 15 - 15
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	<i>,</i> •	
Use attachme	nt if necessary)	
EV: Effective	e date, if other than th	ne date of filing: (OPTION
ective date is	listed, the date must	be specific and cannot be more than five business d
lays after the	date of filing.)	

(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. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)

Signature of a member or an authorized representative of a member.

## Alicia Nutterfield, Organizer

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)