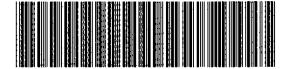
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AUG 0 3 2011
EXAMINER

COVER LETTER

Registration Section

.

Division of Cor	porations					
SUBJECT:	LYNLEE H	OLDINGS,	LLC			
	Name of Limit	ed Liability Compa	ny .			
The enclosed Articles of	Organization and fee(s) are	submitted for filing				
Please return all correspo	ondence concerning this matt	er to the following:	:			
	Joh	ın J. Bleidt				
		Name of Person				
	John J. Bleidt	, Attorney a	at Law, PSC			
		Firm/Company				
	105 S. S	Sherrin Aver	nue			
		Address				
	Louisville	, Kentucky 4	10207	TALL	=	
		y/State and Zip Code		A.C.	11 AUG -2	***
	E-mail address: (to be used t	or future annual reno	rt notification)		2	
For further information of	concerning this matter, please	-	,	OF STATE		
	one of the state o			STA LOR	· · · · · · · · · · · · · · · · · · ·	
John J. Bleidt	of Person	_ at (502)	896-2301 & Daytime Telephone Number	TE HDA	<u>.</u>	
Name o	or reison	Area Couc	& Daytine receptione rumber			
Enclosed is a check for	r the following amount:					
\$125.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	\$155.00 Filin Certified Cop (additional copy	Certificate vis enclosed) Certified C	of Status &		
	Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Registration of Clifton B 2661 Exe	ourier Address on Section of Corporations uilding cutive Center Circle ee, FL 32301			

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:		
The name of the Limited	Liability Company is:	
LYNLEE HOLDI	NGS, LLC	
(Must end w	ith the words "Limited Liability Company, "L	.L.C.," or "LLC.")
ARTICLE II - Address:		
The mailing address and	street address of the principal offic	e of the Limited Liability Company is:
Principal Office Addres	s: Mailing A	ddress:
6953 Lone Oak Blvd.	105 S. Sh	errin Avenue
Naples, Florida 34109	Louisville,	Kentucky 40207
ARTICLE III - Register	ed Agent, Registered Office, & I	Registered Agent's Signature:
	cannot serve as its own Registered Agent. You	
The name and the Florida	street address of the registered ag	
	John J. Bleidt	
	Name	HAT US
	6953 Lone Oak Blvd.	11 AUG -2 ECRETARY LLAHASSE
	Florida street address (P.O. Box	The second secon
Naple	34109	ς S 5 8

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..

City, State, and Zip

Registered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

<u>Title:</u> "MGR" = Manager "MGRM" = Manag		and Address:	
MGR	6953 L	. Bleidt one Oak Blvd. ., Florida 34109	
(Use attachment if	necessary)		
		aa: (O!	DTIONAL)
RTICLE V: Effective da fan effective date is liste or 90 days after the date		nd cannot be more than five busi	ness days prior
an effective date is liste	t, the date must be specific a of filing.)	nd cannot be more than five busi	ness days prior 11 AUG -2 ALLAHASSEE
an effective date is lister or 90 days after the date REQUIRED SIGN S (In accordant to the constitute of an away)	I, the date must be specific a of filing.) ATURE: Ignature of a member or an authorice with section 608.408(3), Flores an affirmation under the penaltice.	orized representative of a member. ida Statutes, the execution of this documents of perjury that the facts stated herein are tited in a document to the Department of	ness days prior TALLAHASSEF, FIND Fortuge.

Page 2 of 2

\$125.00 Filing Fee for Articles of Organization and Designation

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