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SECRETARY OF SIATE DIVISION OF CORPORATIONS

APR =4 2012 T. HAMPTON

COVER LETTER

Division of Corpo			
SUBJECT: INCAS,	LLC		
Jobatett	Name of Limit	ted Liability Company	
The enclosed Articles of Or	rganization and fee(s) are	submitted for filing.	
Please return all correspond	lence concerning this mat	tter to the following:	
Jodi Gelfer	shaum		
Jour Gener	ibaum	Name of Person	
Law Offices	s Lisa L. Danie	ls, P.A.	
		Firm/Company	
123 NW 13	th Street , Suite	312	
		Address	
Boca Raton,	Florida 33432		
		ty/State and Zip Code	
jmg@LDaniels			<u> </u>
	E-mail address: (to be used	for future annual report notification)	
For further information con	cerning this matter, pleas	e call:	
Jodi Gelfenbaum		at (561) 955-1950	
Name of P	erson	Area Code & Daytime Tele	phone Number
Enclosed is a check for the	ne following amount:		
	130.00 Filing Fee & Certificate of Status	\$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
F I F	Mailing Address Registration Section Division of Corporations P.O. Box 6327 Fallahassee, FL 32314	Street/Courier Address Registration Section Division of Corporations Clifton Building 2661 Executive Center C Tallahassee, FL 32301	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

Incas, LLC	
(Must end with the words "Limited L	.iability Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the	e principal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
123 NW 13th Street , Suite 312	860 5TH AVENUE, 2-F
Boca Raton, Florida 33432	New York, New York 10065
business entity with an active Florida registration.) The name and the Florida street address of the property	he registered agent are:
Lisa Daniels, Esq. Na	ame
123 NW 13th S	Street, 312
Florida street	t address (P.O. Box NOT acceptable)
Boca Raton, Florida 33	432 _{FL}
City	, State, and Zip
liability company at the place designated registered agent and agree to act in this cape	to accept service of process for the above stated limited in this certificate, I hereby accept the appointment as acity. I further agree to comply with the provisions of all e performance of my duties, and I am familiar with and

Registered Agent's Signature (REQUIRED)

accept the obligations of my position as registered agent as provided for in Chapter 608, F.S..

(CONTINUED)

Page 1 of 2

SECRETARY OF SIATE OF STATE OF

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	WALTER SERBIN
	860 5TH AVENUE, 2-F
	New York, New York 10065
MGR	INNA SERBIN
	860 5TH AVENUE, 2-F
	New York, New York 10065
(Use attachment if necessary)	
IF V. Effective data if other than	the data of filing. (ODTION
factive data is listed the data may	the date of filing: (OPTIONAL to be specific and cannot be more than five business dates the specific and cannot be more than five business dates the specific and cannot be more than five business dates the specific and cannot be more than five business dates the specific and cannot be more than five business dates the specific and cannot be more than five business dates the specific and cannot be more than five business dates and cannot be more than
days after the date of filing.)	st be specific and cannot be more than five business da
g ,	
DECLIDED SIGNATUDE.	
<u>REQUIRED</u> SIGNATURE:	
	$0 - \frac{1}{2}$
Lina X	(halls
Signature of a me	mber or an authorized representative of a member.
•	mber or an authorized representative of a member. 608.408(3), Florida Statutes, the execution of this document

constitutes a third degree felony as provided for in s.817.155, F.S.)

Lisa Daniels, Esquire

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)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:	
The name of the Limited Liability Company	is:
Incas, LLC	
(Must end with the words "Limited Lie	ability 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:
123 NW 13th Street , Suite 312 Boca Raton, Florida 33432	860 5TH AVENUE, 2-F New York, New York 10065
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Registerest entity with an active Florida registration.)	
The name and the Florida street address of the	registered agent are:
Lisa Daniels, Esq.	
Nam	е
123 NW 13th St	reet, 312
Florida street a	ddress (P.O. Box NOT acceptable)
Boca Raton, Florida 3343	32 _{FL}
City, S	State, and Zip
liability company at the place designated in registered agent and agree to act in this capaci statutes relating to the proper and complete p	APR -
(CONTIN	WED)

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:

Title:	Name and Address:
"MGR" = Manager	
"MGRM" = Managing Member	
MGRM	WALTER SERBIN
	860 5TH AVENUE, 2-F
	New York, New York 10065
MGR	INNA SERBIN
	860 5TH AVENUE, 2-F
	New York, New York 10065
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•	the date of filing: . (OPTION
(Use attachment if necessary) LE V: Effective date, if other than a fective date is listed, the date must days after the date of filing.)	the date of filing: (OPTION t be specific and cannot be more than five business d
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LE V: Effective date, if other than rective date is listed, the date must days after the date of filing.) REQUIRED SIGNATURE: Signature of a mem (In accordance with section of constitutes an affirmation un I am aware that any false information constitutes a third degree fele. Lisa Daniels	aber or an authorized representative of a member. 508.408(3), Florida Statutes, the execution of this document der the penalties of perjury that the facts stated herein are true. Formation submitted in a document to the Department of State only as provided for in s.817.155, F.S.) Esquire
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