

DEC/07/2017/THU 01:44 PM

12/7/2017

FAX N

P. 001

U7000251378

Division of Corporations

Florida Department of State

Division of Corporations

Electronic Filing Cover Sheet

**Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.**

((H17000321045 3)))



H170003210453ABCX

**Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.**

To:

Division of Corporations  
Fax Number : (850)617-6381

From:

Account Name : EXPRESS CORPORATE FILING SERVICE INC.  
Account Number : 120000000146  
Phone : (305)444-4994  
Fax Number : (305)444-4977

**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\***

Email Address: \_\_\_\_\_

FLORIDA LIMITED LIABILITY CO.

LINDA KING IMAGO, LLC

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$155.00

RECEIVED

17 DEC -7 PM 1:01

BUREAU OF CORPORATE  
INFORMATION SERVICES

STATE OF FLORIDA  
DIVISION OF CORPORATIONS

17 DEC -7 AM 8:13

Electronic Filing Menu

Corporate Filing Menu

Help

**ARTICLES OF ORGANIZATION**  
**OF**  
**LINDA KING IMAGO, LLC**

**ARTICLE I**

The name of the limited liability company is **LINDA KING IMAGO, LLC**

**ARTICLE II**

The address of the principal office and the mailing address of the limited liability company is:

333 Mallard Road  
Weston, FL 33327

**ARTICLE III**

The purpose for which this Limited Liability Company is organized is any and all lawful business.

**ARTICLE IV**

The name and the Florida street address of the registered agent of the limited liability company is:

Linda Weigel King  
333 Mallard Road  
Weston, FL 33327

*Having been named as the 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.*

Date: 12/6/2017

  
Registered Agent's Signature

17 DEC -7 AM 8:13  
RELATIONSHIP STATE  
FLORIDA

**ARTICLE V**

The name and address of each person authorized to management and control the Limited Liability Company:

**Title:**

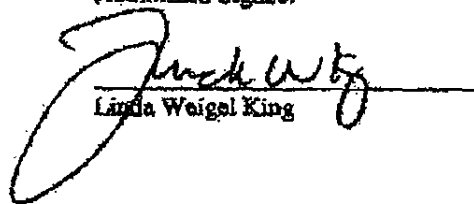
**Name and Address:**

Manager

Linda Weigel King  
333 Mallard Road  
Weston, FL 3327

*In accordance with section 605.0203(1)(b), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.*

Authorized Signee:

  
Linda Weigel King