

120 000 326 393

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



700354044777

10/29/20--01010--022 **25.00

2020 OCT 29 PM 5:03

FILED

DEC 08 2020

S. YOUNG

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: 123 LINCOLN, LLC, a Florida Limited Liability Company

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Jeffrey R. Kuhns, Esq.

Name of Person

Kuhns Law Firm, PLLC

Firm/Company

425 Cross St., Ste. #312

Address

Punta Gorda, FL 33950

City/State and Zip Code

GJC.Laury@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Jeffrey R. Kuhns, Esq. (Kuhns Law Firm, PLLC)

941

205-8000

at (_____) _____

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

☒ \$25.00 Filing Fee

☐ \$30.00 Filing Fee &
Certificate of Status

☐ \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed)

☐ \$60.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed)

Mailing Address:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

**AMENDED AND RESTATED
ARTICLES OF ORGANIZATION FOR
123 LINCOLN, LLC
A FLORIDA LIMITED LIABILITY COMPANY**

ARTICLE I

Name & Effective Date

The name of the Limited Liability Company is: 123 LINCOLN, LLC
Effective Date: 10/10/2020
Document Number: L20000326393
EIN: PENDING

ARTICLE II

Address

The street address and mailing address(es) of the principal office of the Limited Liability Company is/are:

Principal Address:
812 TAMIAMI TRAIL
PORT CHARLOTTE, FL 33953


Mailing Address:
812 TAMIAMI TRAIL
PORT CHARLOTTE, FL 33953

ARTICLE III

Registered Agent, Registered Office, & Registered Agent's Signature

The name and the Florida street address of the registered agent are: COUTURE, GERARD J
812 TAMIAMI TRAIL
PORT CHARLOTTE, FL 33953

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 605, F.S


GERARD J. COUTURE, Registered Agent

Date: October 26, 2020

ARTICLE IV

Limited Liability Purpose

The purpose of the limited liability company shall be for any lawful purpose.

FILED
2020 OCT 29 PM 5:03
CLERK OF CIRCUIT COURT
PORT CHARLOTTE, FL

ARTICLE V

Notice of Annual Report

This Limited Liability Company ("LLC") must file an Annual Report with the Division of Corporations between January 1st and May 1st of every year to maintain "active" status. The LLC's first annual report will be due between January 1st and May 1st of the calendar year following the year the LLC is formed and must be filed online. The fee to file a LLC Annual Report is \$138.75. As of the date of filing these Articles of Organization late fee of \$400 is applied if the report is filed after May 1st. Reminder notices to file the Annual Report will be sent to the e-mail address you provide in these articles. I understand I need to file early to avoid the late fee.


GERARD J. COUTURE, Manager

Date: October 26, 2020

Email Address for Reminder Notice: GJC.Laury@gmail.com

ARTICLE VI

Management

The name and address of each Authorized Representative (AR), Authorized Person (AP), Manager (MGR), or Authorized Member (AMBR) is a person who is authorized to execute and file records with the Office of the Secretary of State pursuant to F.S. 605.102.

Name and Title:

Address:

COUTURE, GERARD J.
Manager (MGR)

9990 SW COUNTY ROAD 769
ARCADIA, FL 34269-8175

COUTURE, LAURY A.
Manager (MGR)

9990 SW COUNTY ROAD 769
ARCADIA, FL 34269-8175

KOHER, KATHLEEN M.
Authorized Representative (AR)

31311 LOPINTO ST
NORTH PORT, FL 34287

ARTICLE VII

Authorized Representative

I am the member or authorized representative submitting these Articles of Organization and affirm that the facts stated herein are true. I am aware that 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. I acknowledge that I have read the above "Notice of Annual Report" statement and understand the requirement to file an annual report between January 1st and May 1st in the


calendar year following formation of this LLC and every year thereafter to maintain "active" status.

X 
GERARD J. COUTURE.
Manager

Date: 10/26, 20 20

X 
LAURY A. COUTURE.
Manager

Date: 10/26, 20 20

X 
KATHLEEN M. KOHER.
Authorized Representative

Date: 10/26, 20 20

(In accordance with section 608.408(3), Florida Statutes, the execution of this affidavit constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

ARTICLE VIII
Complete Amendment and Restatement

The Amended and Restated Articles of Organization supersede the original Articles of Organization and all amendments thereto.

#

IN WITNESS WHEREOF, the Company has caused this Amended and Restated Articles of Organization to be executed by its duly authorized Manager(s) this this 26 day of October 2020.


GERARD J. COUTURE.
Manager

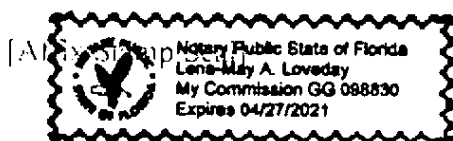
Date: 10/26, 20 20



LAURY A. COUTURE,
Manager

Date: 10/26, 20 20

STATE OF FLORIDA §
COUNTY OF CHARLOTTE §

The foregoing instrument was acknowledged before me by physical presence this 26TH day of OCTOBER 2020, by GERARD J. COUTURE and LAURY A. COUTURE, who ☒ is/are personally known to me or who ☐ has/have produced Florida Driver's Licenses as identification.




Notary Public Signature
Printed Name: LENA-MAY A LOVEDAY
State of Commission: FLORIDA
Number: GG 098830
Expiration: 4/27/2021 or ☐ Lifetime