

2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L98000002383

FILED
Feb 16, 2011
Secretary of State

Entity Name: LINCOLN 845 LLC

Current Principal Place of Business:

C/O JENEL MANAGEMENT CORP
275 MADISON AVE SUITE 702
NEW YORK, NY 10016

New Principal Place of Business:

Current Mailing Address:

C/O JENEL MANAGEMENT CORP
275 MADISON AVE SUITE 702
NEW YORK, NY 10016

New Mailing Address:

FEI Number: 22-3616443 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MIONELO, CRISTINA D
16375 N.E. 18TH AVENUE, SUITE 325
CBA REALTY & MANAGEMENT CORP
NORTH MIAMI BEACH, FL 33162 US

Name and Address of New Registered Agent:

MIONELO, CRISTINA D
1948 HARRISON ST
101
HOLLYWOOD, FL 33020 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

02/16/2011

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM
Name: LINCOLN 845 MANAGING MEMBER CORPORATION
Address: 275 MADISON AVE. SUITE 702
City-St-Zip: NEW YORK, NY 10016

Title: MGRM
Name: DUSHEY, JACK
Address: 275 MADISON AVENUE SUITE 702
City-St-Zip: NEW YORK, NY 10016

Title: MGRM
Name: DUSHEY, DAVID
Address: 1020 PARK AVE, 15A
City-St-Zip: NEW YORK, NY 10028

Title: MGRM
Name: HIRSCHHORN, MICHAEL
Address: 30 FAIR LANE
City-St-Zip: JERICO, NY 11753

Title: MGRM
Name: DUSHEY, SAMMY
Address: 944 PARK AVE #12
City-St-Zip: NEW YORK, NY 10028

Title: MGRM
Name: DUSHEY, ABRAHAM
Address: 9 EAST 40TH ST, MEZZANINE
City-St-Zip: NEW YORK, NY 10016

I hereby certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: JACK DUSHEY

MGRM

02/16/2011

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date