

M06 000001520

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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2006 MAR 14 AM 10:49

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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06 MAR 14 PM 4:45

STATE
DIVISION OF
TALLAHASSEE, FLORIDA

CORP DIRECT AGENTS, INC. (formerly CCRS)
515 EAST PARK AVENUE
TALLAHASSEE, FL 32301
222-1173

FILING COVER SHEET
ACCT. #FCA-14

CONTACT: ED

DATE: 03/14/06

REF. #: RA0816.49343

CORP. NAME: LG VIKOR, LLC

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

- | | | |
|---|---|--|
| <input type="checkbox"/> ARTICLES OF INCORPORATION | <input type="checkbox"/> ARTICLES OF AMENDMENT | <input type="checkbox"/> ARTICLES OF DISSOLUTION |
| <input type="checkbox"/> ANNUAL REPORT | <input type="checkbox"/> TRADEMARK/SERVICE MARK | <input type="checkbox"/> FICTITIOUS NAME |
| <input checked="" type="checkbox"/> FOREIGN QUALIFICATION | <input type="checkbox"/> LIMITED PARTNERSHIP | <input type="checkbox"/> LIMITED LIABILITY |
| <input type="checkbox"/> REINSTATEMENT | <input type="checkbox"/> MERGER | <input type="checkbox"/> WITHDRAWAL |
| <input type="checkbox"/> CERTIFICATE OF CANCELLATION | | |
| <input type="checkbox"/> OTHER: | | |

STATE FEES PREPAID WITH CHECK# _____ FOR \$ 160.00

AUTHORIZATION FOR ACCOUNT IF TO BE DEBITED:

_____ COST LIMIT: \$ _____

PLEASE RETURN:

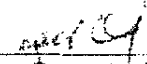
- | | | |
|--|--|---|
| <input checked="" type="checkbox"/> CERTIFIED COPY | <input checked="" type="checkbox"/> CERTIFICATE OF GOOD STANDING | <input type="checkbox"/> PLAIN STAMPED COPY |
| <input type="checkbox"/> CERTIFICATE OF STATUS | | |

Examiner's Initials

**IN COMPLIANCE WITH SECTION 608.503 FLORIDA STATUTES, THE FOLLOWING IS
SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO
TRANSACT BUSINESS IN THE STATE OF FLORIDA:**

1. The name of the limited liability company is **LG VIKOR, LLC** ("Company").
2. Jurisdiction under the law of which the Company is organized is Delaware.
3. The FFI number is applied for.
4. Date of organization is **March 13, 2006**
5. Duration is perpetual.
6. Date first transacted business in Florida: Upon filing of this registration of foreign limited Liability Company.
7. The street address of the Company's principal office is 1691 Michigan Avenue, Suite 510, Miami Beach, Florida 33139.
8. The Company is a manager-managed company.
9. The business address of the member is 1691 Michigan Avenue, Suite 510, Miami Beach, Florida 33139. The name of the member is LG Capital Partners, LLC
10. *Attached is an original certificate of existence, no more than ninety (90) days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which the Company is organized.*
11. Nature of business or purposes to be conducted or promoted in Florida: the transaction of any lawful business.

LG VIKOR, LLC
Delaware Limited Liability Company

By: 
Print Name: Scott A. Osman
Title: Executive Vice President

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TALLAHASSEE, FLORIDA

**CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE**

*PURSUANT TO THE PROVISIONS OF SECTION 608.415 OR 608.507, FLORIDA STATUTES,
THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING
STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE
STATE OF FLORIDA*

1. The name of the limited liability company is **LG VIKOR, LLC**
2. The name and Florida street address of the registered agent and office are:

Scott Osman
1691 Michigan Avenue, Suite 510
Miami Beach, Florida 33139

*Having been named as registered agent and to accept service of process for the above named
limited liability company at the place designated in this certificate, the undersigned hereby
accepts the appointment as registered agent and agrees to act in this capacity. The undersigned
further agrees to comply with the provisions of all statutes relating to the proper and complete
performance of its duties, and the undersigned is familiar with and accepts the obligations of its
position as registered agent as provided for in Chapter 608, F.S.*

By: _____
Print Name: Scott A. Osman
Title: Executive Vice President

Delaware

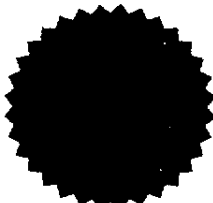
PAGE 1

The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "LG VIKOR, LLC" IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF THE FOURTEENTH DAY OF MARCH, A.D. 2006.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "LG VIKOR, LLC" WAS FORMED ON THE THIRTEENTH DAY OF MARCH, A.D. 2006.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE NOT BEEN ASSESSED TO DATE.



Harriet Smith Windsor
Harriet Smith Windsor, Secretary of State

4124718 8300

AUTHENTICATION: 4588873

060244470

DATE: 03-14-06