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Division of Corporations

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From:

Account Name : MCLIN & BURNSED P.A.

Account Number : 104657003604 Phone : (352)753-4690 Fax Number : (352)751-4993 SECRETARY OF ST

FLORIDA PROFIT/NON PROFIT CORPORATION S

Lynn 5, Inc.

Certificate of Status	1
Certified Copy	0
Page Count	04
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Electronic Filing Menu

Corporate Filing Menu

Help

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ARTICLES OF INCORPORATION

LYNN 5, INC.

The undersigned, acting as incorporator of a corporation under the Florida Business Corporation Act, adopts the following Articles of Incorporation:

ARTICLE I. NAME

The name of this corporation is Lynn 5, Inc.

ARTICLE IL PRINCIPAL OFFICE OR MAILING ADDRESS OF CORPORATION

The street address of the Corporation's principal office of this corporation is: 2097 C.R. 245 C, Oxford, Florida 34484. The mailing address of this corporation is: 2097 C.R. 245 C, Oxford, Florida 34484.

ARTICLE III. CAPITAL STOCK

The maximum number of shares of stock that this corporation is authorized to have outstanding at any one time is:

Five thousand (5,000) shares of common stock all of one class, having a nominal or par value of ONE DOLLAR (\$1.00) per share.

ARTICLE IV. INITIAL OFFICERS AND DIRECTORS

The name and address of the initial Director is as follows:

Sabrina L. Ortengren

2097 C.R. 245 C, Oxford, Florida 34484

The name and address of the initial officer is as follows:

Sabrina L. Ortengren

2097 C.R. 245 C, Oxford, Florida 34484

President, Treasurer and Secretary

ARTICLE V. INITIAL REGISTERED OFFICE AND AGENT

The street address of the initial registered agent of this corporation is 2097 C.R. 245 C, Oxford, Florida 34484. The name of the initial registered agent of this corporation at that address

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is Sabrina L. Ortengren.

ARTICLE VI. INCORPORATOR

The name and address of the Incorporator is Sabrina L. Ortengren, 2097 C.R. 245 C, Oxford, Florida 34484.

ARTICLE VII. AMENDMENT

This corporation reserves the right to amend or repeal any provisions contained in these Articles of Incorporation, or any amendment hereto, and any right conferred upon the shareholders is subject to this reservation.

ARTICLE VIII. INDEMNIFICATION

The Corporation shall indemnify its officers and directors to the fullest extent permitted by the Florida Business Corporation Act.

IN WITNESS WHEREOF, the undersigned subscriber has executed these Articles of Incorporation this 10 day of 12006.7

Sabrina L. Ortengren

Incorporator

ACCEPTANCE BY REGISTERED AGENT:

I AM, FAMILIAR WITH AND ACCEPT THE DUTIES AND RESPONSIBILITIES AS REGISTERED AGENT FOR SAID CORPORATION.

Sabrina L. Ortengren

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STATE OF FLORIDA COUNTY OF LAKE

The foregoing instrument was acknowledged before me this 10 day of remain 2006 by Sabrina L. Ortengren, Incorporator, who did not take an oath.

NOTARY PUBLIC-STATE OF PLORIDA (Signature of Notary) [SEAL]

Vivian M. Gracco (Typed name of Notary)

(Commission Number)

Personally known ____ or Produced Identification ___

Type of Identification
Produced:

VIVIAN M. GRECCO
MY COMMISSION # 00 196934
EXPIRES: June 30, 2007
Sonded Turu Striget Notary Services