

Department of Environmental Protection

Jeb Bush Governor Twin Towers Office Building 2600 Blair Stone Road Tallahassee, Florida 32399-2400

David B. Struhs Secretary

August 20, 2002

Mr. Sung S. Ock Discount Dry Cleaners 3409 North 22 Street Tampa, Florida 33605

Re: Facility No.: 0571034-002

Dear Mr. Ock:

The Department has received the Title V General Permit Notification Form for the dry cleaning facility that you submitted on July 16, 2002.

Please note that in January of each year the Department will be mailing fee notices to those facilities using the Title V general permit. This annual operation fee is \$50 and it is due and payable between January 15 and March 1 of each year the facility is in operation and is subject to the requirements of the Title V general permit.

If you have or expect to have any changes in your mailing address, location address, responsible official, or phone number, please notify the Department at the following address:

Title V General Permits Office Bureau of Air Monitoring and Mobile Sources MS 5510 Department of Environmental Protection 2600 Blair Stone Road Tallahassee, FL 32399-2400

If there are any changes in the facility status, including change of operating parameters or equipment, or if you have any additional questions regarding the Title V General Permit Program, please contact the district or local air program compliance inspector in your area.

Sincerely,

Joe Kahn, Chief

Bureau of Air Monitoring and Mobile Sources

JK/jw

cc: Mr. Thomas Shelton, Hillsborough County

Pail 96-01 500 4 Compliment



Jeb Bush Governor

Department of **Environmental Protection**

Twin Towers Office Building 2600 Blair Stone Road Tallahassee, Florida 32399-2400

David B. Struhs Secretary

August 26, 2002

Mr. Sung S. Ock Discount Dry Cleaners 3409 North 22 Street Tampa, Florida 33605

Dear Mr. Ock:

The Bureau of Air Monitoring and Mobile Sources recently received your Perchloroethylene Dry Cleaning Notification Form and check (#1223) in the amount of \$50.

We appreciate your submittal. However, your check is being returned to you since it is not due at this time. Fees are due and payable between January 15 and March 1 in the year following each year for which the facility is in operation and subject to the requirements of the general permit. The Department will send you an invoice in time for the next payment cycle.

If you have any questions, please call me at 850/921-9583.

NO:0571034-002

Sincerely,

Sandra Bowman

Environmental Manager

Mobile Source Control Section

Duronan

Bureau of Air Monitoring

BROTHERS OCK LLC 02-2002

DBA DISCOUNT DRY CLEANERS

PHONE 813-247-4665 2-42-42 6-4

3409 NORTH 22ND STREET

TAMPA, FL 33605 - 12-23

PAY
TO THE ORDER OF DEpartment of Environment Protection \$ 50
The Bank of Tampa

ARMENIA OFFICE

TAMPA, FLORIDA 33603



Department of Environmental Protection

Best Available Copy

Jeb Bush Governor Twin Towers Office Building 2600 Blair Stone Road Tallahassee, Florida 32399-2400

David B. Struhs Secretary

August 20, 2002

Mr. Sung S. Ock Discount Dry Cleaners 3409 North 22 Street Tampa, Florida 33605

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Sincerely,

hw Joe Kahn, Chief

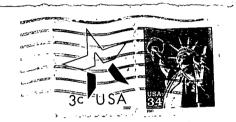
Bureau of Air Monitoring and Mobile Sources

JK/jw

ce: Mr. Thomas Shelton, Hillsborough County

BROTHERS OCK LLC D.B.A. Discount Dry Cleaners 3409 N. 22nd St. Tampa, FL 33605





RECEIVED

AUG 26 3AAA

& Mobile Sources

0571034-002 7/22/02 Spole with Mr. Sung S. Och and he stated that the washers and dryes are not pere machines. Le stated he

has two dry cleaning machines that

Page 15 1(b) Only for Pere-using Fransfer machines. Markout information if non-pere-using

information.

DEP ROUTING AND TRANSMITTAL SLIP			
TO: (NAME, OFFICE, LOCATION)	3		
1	4		
2	5		<u> </u>
PLEASE PREPARE REPLY FOR:	COMMENTS:		
SECRETARY'S SIGNATURE			
DIV/DIST DIR SIGNATURE	,		
MY SIGNATURE			•
YOUR SIGNATURE			
DUE DATE	÷		
ACTION/DISPOSITION			
DISCUSS WITH ME			
COMMENTS/ADVISE			
REVIEW AND RETURN	 *		
SET UP MEETING			
FOR YOUR INFORMATION			
HANDLE APPROPRIATELY			
INITIAL AND FORWARD			
SHARE WITH STAFF			
FOR YOUR FILES			
FROM:	DATE:	PHONE:	

PERCHLOROETHYLENE DRY CLEANER
AIR GENERAL PERMIT NOTIFICATION FORM

Part III. Notification of Intent to Use General Permit

Prior to filling out this form, please read the instructions provided at the end of the form for your files completed form to the address listed in the instructions and keep a copy of the form for your files.

Facility Name and Location		
1. Facility Owner/Company Name (Name of corporation, ag	gency, or individ	ual owner):
SUNG S. OCK / Brothers Ock	LLC dit	a Discount Dry Neamon
2. Site Name (For example, plant name or number): 273	count D	ny cleaner plant
2. Site Name (For example, plant name or number): D73 3409. N 22nd ST 73	mpg	FL 33605
3. Hazardous Waste Generator Identification Number:		
FLD 105964126		
4. Facility Location: 3409 N 2279 ST/L	75count	DM Cleaners
Street Address:	6-1-1-0	77 6 1 22 (0)
4. Facility Location: 3409 N 22nd ST/D Street Address: City: 73mp3 County: H7//SD	garough	Zip Code: 33605
Facility Identification Number (DEP: Use ONLY)	fillin)	
Responsible Official		
6. Name and Title of Responsible Official:		1 4
Name: SUNG S OCK	Title: Dre	esident
I SUNCIS DUX	.7	
	<i>J</i>	
7. Responsible Official Mailing Address:	<i>J</i>	
7. Responsible Official Mailing Address: Organization/Firm: Street Address: 3409 N 220d Street	_	
7. Responsible Official Mailing Address: Organization/Firm: Street Address: 3409 N 22nd Street	_	Zip Code: 3360 5
7. Responsible Official Mailing Address: Organization/Firm: Street Address: 3409 N 22nd Street City: Tampa County: Hills bore	_	
7. Responsible Official Mailing Address: Organization/Firm: Street Address: 3409 N 22nd Street City: 7ampa County: Hills bord 8. Responsible Official Telephone Number:	ough	Zip Code: 3360 5
7. Responsible Official Mailing Address: Organization/Firm: Street Address: 3409 N 22nd Street City: Tampa County: Hills bore	ough	
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7. Responsible Official Mailing Address: Organization/Firm: Street Address: 3409 N 22nd Street City: 7ampa County: Hills bore 8. Responsible Official Telephone Number: Telephone: (213) 242-4464 Facility Contact (If different from Responsible Official)	Fax: (P/3	Zip Code: 3360 5
7. Responsible Official Mailing Address: Organization/Firm: Street Address: 3409 N 22nd Street City: 7ampa County: Hills bore 8. Responsible Official Telephone Number: Telephone: (213) 242-4464	Fax: (P/3	Zip Code: 3360 5
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DEP Form No. 62-213.900(2)

Effective: 2/24/99

Facility Information

	ACHINES ONLY	. ·	·
How many dry-to-dry ma	chines do you have	e on-site? [a]	
For each dry-to-dry mach	ine on-site, please	provide the following informatio	n:
Date Initially Purchased From Manufacturer	Status (circle one)	Control Device Required* (circle one)	Date Control Device Installed (if already included at time of purchase, write "SAME")
Of-DEC-91 Of-DEC-91	Existing/Nev	w RC/CA/None required	<u>Same</u>
of-DEC-91	Existing/Nev	w RC/CA/None required	<u>same</u>
	Existing/Nev	w RC/CA/None required	
*CONTROL DEVICE K	EY: RC = re	frigerated condenser CA =	carbon adsorber
1.(b) TRANSFER MAC	HINES ONLY	0	
How many washers do yo	ou have on-site?	$[\underline{6}]$,
How many dryers/reclain	iers do you have o	n-site? []	
unit. If the transfer maching 1993, it is a NEW unit (r	ine was purchased to units purchased	from the manufacturer between I	December 9, 1991, it is an EXISTING December 9, 1991 and September 22, owed to operate under this general formation:
Date Initially Purchased	Status	Control Device Required*	
From Manufacturer	(circle one)	(circle one)	Date Control Device Installed (if already included at time of purchase, write "SAME")
From Manufacturer OP-DEC-91			(if already included at time of purchase, write "SAME")
From Manufacturer	(circle one)	(circle one)	(if already included at time of purchase, write "SAME")
From Manufacturer OP-DEC-91	(circle one) Existing/New	(circle one) RC/CA/None required	(if already included at time of purchase, write "SAME")
From Manufacturer OP-DEC-91	(circle one) Existing/New Existing/New Existing/New	(circle one) RC/CA/None required RC/CA/None required	(if already included at time of purchase, write "SAME")
*CONTROL DEVICE K	(circle one) Existing/New Existing/New Existing/New Existing/New	(circle one) RC/CA/None required RC/CA/None required RC/CA/None required frigerated condenser	(if already included at time of purchase, write "SAME") Some Some carbon adsorber
*CONTROL DEVICE K 2.(a) How much perchlo	Existing/New Existing/New Existing/New Existing/New EX: RC = re roethylene (perc) has (You must fill	RC/CA/None required RC/CA/None required RC/CA/None required frigerated condenser CA = nave you used within the last 12 muthis in)	(if already included at time of purchase, write "SAME") Some Some carbon adsorber
*CONTROL DEVICE K 2.(a) How much perchlor [/2-5] gallor (b) If less than 12 more	Existing/New Existing/New Existing/New Existing/New EX: RC = re roethylene (perc) has (You must fill onths, how many? [RC/CA/None required RC/CA/None required RC/CA/None required RC/CA/None required frigerated condenser	(if already included at time of purchase, write "SAME") Some Some carbon adsorber
*CONTROL DEVICE K 2.(a) How much perchlor [/2-5] gallor (b) If less than 12 more	Existing/New Existing/New Existing/New Existing/New EX: RC = re roethylene (perc) has (You must fill onths, how many? [RC/CA/None required RC/CA/None required RC/CA/None required RC/CA/None required frigerated condenser	(if already included at time of purchase, write "SAME")

DEP Form No. 62-213.900(2)

3. What is the facility's source classification based on the definitions found in section (3) of Part II? Indicate with an "X". Select one classification only.)
Small Area Source []
Dry-to-dry machines only on-site (used less than 140 gallons of perc per year) Transfer only on-site (used less than 200 gallons of perc per year) Both machine types on-site (used less than 140 gallons of perc per year)
Large Area Source [X]
Dry-to-dry machines only on-site (used 140 - 2,100 gallons of perc per year) Transfer only on-site (used 200 - 1,800 gallons of perc per year) Both machine types on-site (used 140 - 1,800 gallons of perc per year)
4. What control technology is required on machines pursuant to section (5) of Part II of this notification form? (Indicate with an "X".)
Existing machines at small area source (NONE REQUIRED) [] New machines at small area source Refrigerated condenser []
Existing machines at large area source Carbon adsorber [
5. A facility which contains non-exempt emissions units shall not be eligible to use the general permit pursuant to Rule 62-213.300, F.A.C. Veriry that all steam and hot water generating units on-site meet the following exemption criteria or that no such units exist on-site (see attached memo for the criteria).
All steam and hot water generating units exempt [] OR No such units on-site []
How many boilers do you have on-site? [3]
For each boiler, indicate its horsepower (HP) rating: [15] [15]
What type of fuel do you use? [] propane [] No. 2 fuel oil [] No. 4 fuel oil [] Other (please list)
6. Equipment Monitoring and Recordkeeping Information
Check all logs which are required to be kept on-site in accordance with the requirements of this general permit:
(a) Purchase receipts and solvent purchases/solvent addition log
(b) Leak detection inspection and repair []
(c) Refrigerated condenser temperature monitoring
(d) Carbon adsorber exhaust perc concentration monitoring
(e) Startup, shutdown, malfunction plan

DEP Form No. 62-213.900(2) Effective: 2/24/99

7. Surrender of Existing DEP Air Permit(s) Please indicate with an "X" the appropriate selection: [X] I hereby surrender all existing DEP air permits authorizing operation of the facility indicated in this notification form; the permit number(s) are [Mo DEP air permits currently exist for the operation of the facility indicated in this notification form. Responsible Official Certification I, the undersigned, am the responsible official, as defined in Part II of this form, of the facility addressed in this notification. I hereby certify, based on information and belief formed after reasonable inquiry, that the statements made in this notification are true, accurate and complete. Further, I agree to operate and maintain the air pollutant emissions units and air pollution control equipment described above so as to comply with all terms and conditions of this general permit as set forth in Part II of this notification. I will promptly notify the Department of any changes to the information contained in this notification. Sung S. Ock Print name of responsible official

DEP Form No. 62-213.900(2)

Effective: 2/24/99



THIS PORTION MUST BE ATTACHED TO REMITTANCE FOR PROPER HANDLING

Please include your AIRS ID# on your check or money order. This number can be found below on your mailing label.

TOTAL AMOUNT DUE: \$50.00

Do NOT Remove Label

AIRS ID# 0571034-002

Discount Dry Cleaners Mr. Sung S. Ock 3409 North 22 Street Tampa, Florida 33605

FOR GOVERNMENT USE ONLY Org.: 37550101000 EO:-A1 Fund: 20-2-035001

Obj.: 002273

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41.2B	Postage Certified Fee	\$	Postmark
9200	Return Receipt Fee (Endorsement Required) Restricted Delivery Fee (Endorsement Required)		Here
7000 0400	Discount Street, Amr. Sung City, Sta 3409 Not	AIRS ID# 05 Dry Cleaners S. Ock orth 22 Street Florida 33605	71034-002

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SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
 Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 	A. Signature X
Article Addressed to:	If YES, enter delivery address below:
AIRS ID# 0571034-002 Discount Dry Cleaners Mr. Sung S. Ock	
3409 North 22 Street	3. Service Type ☑ Certified Mail □ Express Mail
Tampa, Florida 33605	☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ C.O.D.
	4. Restricted Delivery? (Extra Fee) ☐ Yes
2. Article Number (Transfer from service label) 7000 0600	0026 4128 9083
PS Form 3811, August 2001 Domestic Retu	

UNITED STATES POSTAL SERVICE



First-Class Mail Postage & Fees Paid USPS Permit No. G-10

• Sender: Please print your name, address, and ZIP+4 in this box •

BUR. OF AIR MONITORING & MOBILE SOURCES OF AIR MONITORING & MODILE SOURCE OF AIR MONITORING & MODILE SOURCE & MODILE &

ENOTHERS OCK LLS 3409 N. 22nd St. Temps, Ft. 33885 BROTHERS OCK LLC D.B.A. Discount Bry Cleaners 3409 N. 22nd St. Tampa, FL 33605

General Permits Section

Bureau of Air Monitoring and Mobile

Sources, Ms 5510

Department of Environmental protection
tection
2600 Blair stome Road

Tallahassee, FL 32399-2400

THIS PORTION MUST BE ATTACHED TO REMITTANCE FOR PROPER HANDLING

458813 FEB102006

Please include your AIRS ID# on your check or money order. This number is located on the mailing label.

TOTAL AMOUNT DUE: \$50.00

Do NOT Remove Label

571034 10 DISCOUNT DRY CLEANERS 3409 N 22nd Street TAMPA, FL 33605 FLAIR ACCT. CODE 37267203500137550100000 BENIFITTING OBJECT CODE 002000 BENIFITTING CATEGORY 0002000

FOR GOVERNMENT USE ONLY ORG.: 37550101000 EO: A1

FUND: 20-2-035001 OBJECT: 002273

Printed on recycled paper.

BROTHERS OCK LLC D.B.A. Diccount Dry Cleaners 3409 N. 22nd St. Tampa, FL 33605



TITLE V - General Permit Receipts Post Office Box 3070 Tallahassee, FL 32315-3070

THIS PORTION MUST BE ATTACHED TO REMITTANCE FOR PROPER HANDLING

Please include your AIRS ID# on your check or money order. This number is located on the maiting label.

TOTAL AMOUNT DUE: \$50.00

AIRS ID#571034
BROTHERS OCK LLC
3409 N 22nd Street
TAMPA, FLORIDA 33605

Printed on recycled paper.

FLAIR ACCT. CODE 372020350013755010000
BENIFITTING OBJECT CODE 002000
BENIFITTING CATEGORY 0002007

FOR GOVERNMENT USE ONLY ORG.: 37550101000 EO: A1 FUND: 20-2-035001

FUND: 20-2-035001 OBJECT: 002273

THIS PORTION MUST BE ATTACHED TO REMITTANCE FOR PROPER HANDLING

445272 FEB 42005

Please include your AIRS ID# on your check or money order. This number is located on the mailing label.

TOTAL AMOUNT DUE: \$50.00

Do NOT Remove Label

AIRS ID# 571034 10 DISCOUNT DRY CLEANERS 3409 N 22nd Street TAMPA, FL 33605

Printed on recycled paper.

ECEIVE Monitor Bures Mobile Sources

FOR GOVERNMENT USE ONLY

ORG.: 37550101000 EO: A1

FUND: 20-2-035001 OBJECT: 002273

730	(Domestic Mail Only; No Insurance Coverage Provided) For delivery information visit our website at www.usps.com	
± ±	OFFICIAL	494
17 C	Postage \$	
1	Certified Fee	,
	Return Reciept Fee (Endorsement Required)	Postmark Here
200	Restricted Delivery Fee (Endorsement Required)	
	Tot AIRS ID# 571034 1stC	
m	DISCOUNT DRY CLEANER	.s
7003	3409 N 22nd Street	****
~	Stree TAMPA, FL 33605	
	City,	

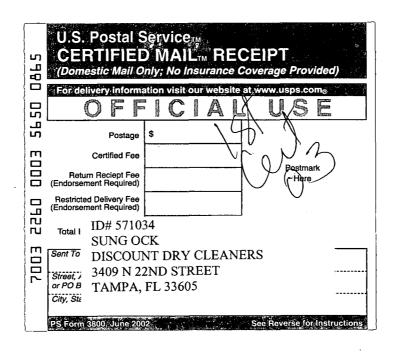
SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
 Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse control to the tree control to th	A. Signature Agent Addressee
so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits.	B. Received by (Printed Name) C. Date of Delivery
Article Addressed to:	D. Is delivery address different from item 1? ☐ Yes If YES, enter delivery address below: ☐ No
AIRS ID# 571034 1stC DISCOUNT DRY CLEANERS 3409 N 22nd Street	John
TAMPA, FL 33605	3. Service Type Contified Mail Express Mail
to the second	☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ C.O.D.
	4. Restricted Delivery? (Extra Fee) ☐ Yes
2. Article Number 7003 0500	
PS Form 3811, February 2004 Domestic	Return Receipt 102595-02-M-1540

United States Postal Services A. F. Postage & Fees Paid USPS Permit No. G-10

• Sender: Please print your name, address, and ZIP+A in this box •

DARM/MOBILE SOURCE CONTROTERROGIST DEPT. OF ENVIRONMENTAL PROTESTION MAIL STATION 5510
2600 DLAIR STONE ROAD TALLAHASSEE, FLORIDA 32399-2400

TALLAHASSEE, FLORIDA 32399-2400



SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
 Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 	A. Signature X
ID# 571034 SUNG OCK DISCOUNT DRY CLEANERS 3409 N 22ND STREET TAMPA, FL 33605	3. Service Type Certified Mail
2. Article Number (Transfer from service label) 7003 2	260 0003 5650 0865
PS Form 3811, August 2001 Domestic Ret	urn Receipt 102595-02-M-1540

UNITED STATES POSTAL SERVICE



First-Class Mail Postage & Fees Paid USPS Permit No. G-10

• Sender: Please print your name, address, and ZIP+4 in this box •

BUR. OF AIR MONITORING & MOBILE SOURCES
DEPT. OF ENVIRONMENTAL PROTECTION & MOBILE SOURCES
MAIL STATION 5510
2600 BLAIR STONE ROAD
TALLAHASSEE, FLORIDA 32399-2400

**REAL MODILE SOURCES
**OF AIR MOD

(cut here)

THIS PORTION MUST BE ATTACHED TO REMITTANCE FOR PROPER HANDLING 437208

Please include your AIRS ID# on your check or money order. This number can be found below 32 your Mailing label.

TOTAL AMOUNT DUE: \$50.00

Do NOT Remove Label

ID# 571034 SUNG OCK **DISCOUNT DRY CLEANERS** 3409 N 22ND STREET TAMPA, FL 33605

FOR GOVERNMENT USE ONLY Org.: 37550101000 EO: A1 Fund: 20-2-035001