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Certified Copies	_ Certificates	of Status
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06 MAR 17 AM 10: 42 SECRETARIA STATE ALLABASSEE FLORIDA

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: HUGO HER NANDEZ, LLC (Name of Limited Liability Company)
(Name of Limited Liability Company)
The enclosed Articles of Organization and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
HUGO HERNANDEZ (Name of Person)
HUGO HEANANDEZ LLC (Firm/Company)
2100 N. OCEAN BLUD. # 9A (Address)
FORT LAUDEROALE, FLORIDA 33305 (City/State and Zip Code)
(City/State and Zip Code)
For further information concerning this matter, please call:
HUGO HERNANDE 2 at (954) 873-8325 (Name of Person) (Area Code & Daytime Telephone Number)
(Name of Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
\$125.00 Filing Fee Status Stat
Mailing AddressStreet/Courier AddressRegistration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301



ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:		
HUGO HERNANDEZ LLC		
(Must end with the words "Limited Liability Company, "Limited Company" or their abbreviation "LLC," or	"L.C.,")	ng pertua - 2
ARTICLE II - Address:		
The mailing address and street address of the principal office of the Limited Liabi	lity Con	npany is:
Principal Office Address: Mailing Address:	1	
2100 N. OCEAN BLVO. #9A (SAME	- /	
FORT LAUDERDALE, FLORIDA		· • •
33305		
ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Si (The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individua business entity with an active Florida registration.)		
The name and the Florida street address of the registered agent are:	TAL	9.0
HUGO HERNANDEZ	LAC LAC	F 06 MAR 1
	ASSI	FIL 17
2100 N. OCEAN BLUD # 9A	<u>.</u>	Æ.ED
Florida street address (P.O. Box NOT acceptable) FOAT LAUDERDALE FL 33305	TOR LOR	AH 10: 42
FORT LAUDERDALE FL 33305	DA DE	1 2
City, State, and Zip		
Having been named as registered agent and to accept service of process for the abo		

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 608, F.S..

Registered Agent's Signature (REQUIRED)

(CONTINUED) Page 1 of 2

ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

<u>Title:</u> "MGR" = Manager	Name and Address:		
"MGRM" = Managing Member MGR	HUGO HEANANDEZ 2100 N. OCEAN BLUD FT. LAUDEBDALE, FC	#9A 33305	
		-	
· · · · · · · · · · · · · · · · · · ·			
· #			
(Use attachment if necessary) ARTICLE V: Effective date, if other than the dat (If an effective date is listed, the date must be sp to or 90 days after the date of filing.)	e of filing: <u>3-14-2006</u> . (OPTIC pecific and cannot be more than five business	- ONAL) days prior	
REQUIRED SIGNATURE:	TALLAHAS nambes	06 MAR I	
(In accordance with section	an authorized representative of a member. 1 608.408(3), Florida Statutes, the execution es an affirmation under the penalties of perjury in are true.)	LED 7 AM 10: 42	
H460 H	ERNANDE Z or printed name of signee		

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)