L05000113547

	(Requesto	or's Name)	, - ,
	(Address)	1	
	(Address)		
	(City/State	e/Zip/Phone #)	
	(011)101010	3121pri 110110 11)	
PICK-UF	· □	WAIT	MAIL
	(Business	Entity Name)	
	(Documer	nt Number)	
Certified Copies		Certificates of	Status
Special Instructions	to Filing	Officer:	
ame vailabil ity			
Document	-	<u></u>	
Examiner	DCOff	ce Use Only	
Jpdater	ncc		
Updater V erif ye r	, \CC		
Acknowledgement	DCC		
W P Verifyer	⊔CC		



600061558286

11/21/05--01020--012 **155.00

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: C6 28 HOLDINGS, LLC (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:
BEATRIZ FERNANDEZ
DEHIRIC I ERNANCE (Name of Person)
(
(Firm/Company)
• • •
2520 SW 22 STREET SUTTE2363 (Address)
(Address)
MIAMI FL 33145
(City/State and Zip Code)
For further information concerning this matter, please call:
_
Beatriz Femerales at 305, 898-0845 (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 □\$130.00 Filing Fee & □\$155.00 Filing Fee & □\$160.00 Filing Fee,
Certificate of Status Certified Copy Certificate of Status &
(additional copy is enclosed)
Mailing Address Street/Courier Address
Division of Corporations Division of Corporations
Tallahassee, FL 32314 2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is	s:
(Must end with the words "Limited Liability Company, "Lim	5, LLC ited Company" or their abbreviation "LLC," or "L.C.,")
ARTICLE II - Address: The mailing address and street address of the part of th	principal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
PO BOX 65431Z MIAMI FL 33165	PO BOX 654312 MIAMI A 33165
ARTICLE III - Registered Agent, Registere (The Limited Liability Company cannot serve as its own Reg business entity with an active Florida registration.)	ed Office, & Registered Agent's Signature: istered Agent. You must designate an individual or another
The name and the Florida street address of the	~
HAMIGUA Nam	REAL LLC
2520 Sú	ddress (P.O. Box NOT acceptable)
M(AM) City, State	FL 33145 and Zip
liability company at the place designated in registered agent and agree to act in this capac statutes relating to the proper and complete p	accept service of process for the above stated limited this certificate, I hereby accept the appointment as ity. I further agree to comply with the provisions of all performance of my duties, and I am familiar with and sistered agent as provided for in Chapter 608, F.S

(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:

"MGR" = Mana		
"MGRM" = Ma	naging Member	
MGR		ARMANICK HOLDINGS, LLC POBOX 654312 MIAMI & 33165
		
		
	e date, if other than the da	ate of filing: (OPTIONAL)
TICLE V: Effective	e date, if other than the disted, the date must be state of filing.)	ate of filing: (OPTIONAL) specific and cannot be more than five business days p
TICLE V: Effective n effective date is less than 1900 days after the control of t	e date, if other than the disted, the date must be state of filing.)	
TICLE V: Effective n effective date is less than 1900 days after the control of t	e date, if other than the disted, the date must be state of filing.) IGNATURE:	
TICLE V: Effective n effective date is less than 1900 days after the control of t	e date, if other than the disted, the date must be state of filing.) IGNATURE: Signature of a member of the manufacture of a member of the manufacture of the member of the manufacture of the member of the membe	or an authorized representative of a member. on 608.408(3), Florida Statutes, the execution of the same an affirmation under the penalties of perjury
TICLE V: Effective n effective date is less than 1900 days after the control of t	e date, if other than the disted, the date must be state of filing.) IGNATURE: Signature of a member of this document constitution.	or an authorized representative of a member. on 608.408(3), Florida Statutes, the execution tess an affirmation under the penalties of perjury tein are true.)
TICLE V: Effective n effective date is less than 1900 days after the control of t	date, if other than the disted, the date must be state of filing.) IGNATURE: Signature of a member of this document constitution that the facts stated her	or an authorized representative of a member. on 608.408(3), Florida Statutes, the execution tess an affirmation under the penalties of perjury tein are true.)
TICLE V: Effective n effective date is less than 1900 days after the control of t	date, if other than the disted, the date must be state of filing.) IGNATURE: Signature of a member of this document constitution that the facts stated her Type	or an authorized representative of a member. on 608.408(3), Florida Statutes, the execution tites an affirmation under the penalties of perjury tein are true.)