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SECRETARY OF STATE

-9 M B 21

M. THOMAS
M. THOMAS
FEB 10 2009
EXAMINER

COVER LETTER

TO:	Registration Section Division of Corporations			
SUBJE	CT: HASPEN Constr	uction LLC.		
	(Name of Limite	d Liability Company)		
The enc	losed Articles of Organization and fee(s) are	ubmitted for filing.		
Please re	eturn all correspondence concerning this matt	er to the following:	;	
(Gary Pena			
_		Name of Person)		
		Firm/Company)		
	11357 NW 42nd Terrace			
		(Address)		
ſ	Doral, Florida, 33178	••	etro S	79
	(City	/State and Zip Code)	ECS.	ngFEB
For furth	ner information concerning this matter, please	call:	HASSEE C	i I
Gary	Pena	at (561) 267	7-8721 $\Xi_{\mathcal{S}}^{\mathcal{T}}$	3
	(Name of Person)	(Area Code & Day	ytime Telephone Number)	i
Enclose	d is a check for the following amount:	• • • • • • • • • • • • • • • • • • •		
\$125.0	0 Filing Fee * \$\sumsymbol{\sumsymbol{\subsymbol{\sin}\symbol{\sin}\sin\sin\sin\sin\sin\sin\sin\sin\sin\sin	\$155.00 Filing Fee Certified Copy (additional copy is encl	Certificate of Status &	
	Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street/Courier And Registration Section of Corporation Building 2661 Executive Tallahassee, FL	tion porations Center Circle	



October 28, 2008

GARY PENA 11357 NW 42ND TERRACE DORAL, FL 33178

SUBJECT: HASPEN CONSTRUCTION LLC

Ref. Number: W08000049373

We have received your document for HASPEN CONSTRUCTION LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Pursuant to section 608.409(2), F.S., the effective date must be specific, cannot be more than five business days prior to the date of filing or more than 90 days after the date of filing. Our office received your document on October 27, 2008. Please amend your document accordingly.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6097.

Letter Number: 908A00055356

Marsha Thomas Regulatory Specialist II

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

HASPEN CONSTRUC	nited Liability Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address	of the principal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
11357 NW 42nd Terrace	11357 NW 42nd Terrace
Doral, Florida, 33178	Doral, Florida, 33178
	gistered Office, & Registered Agent's Signature:
	gistered Office, & Registered Agent's Signature: own Registered Agent. You must designate an individual or another s of the registered agent are: Amin Hasbun
(The Limited Liability Company cannot serve as its business entity with an active Florida registration.)	gistered Office, & Registered Agent's Signature: own Registered Agent. You must designate an individual or another s of the registered agent are:
(The Limited Liability Company cannot serve as its business entity with an active Florida registration.)	gistered Office, & Registered Agent's Signature: own Registered Agent. You must designate an individual or another s of the registered agent are: Amin Hasbun Name
(The Limited Liability Company cannot serve as its business entity with an active Florida registration.) The name and the Florida street address 11357 NW 42r	gistered Office, & Registered Agent's Signature: own Registered Agent. You must designate an individual or another s of the registered agent are: Amin Hasbun Name
(The Limited Liability Company cannot serve as its business entity with an active Florida registration.) The name and the Florida street address 11357 NW 42r	gistered Office, & Registered Agent's Signature: own Registered Agent. You must designate an individual or another s of the registered agent are: Amin Hasbun Name Ind Terrace street address (P.O. Box NOT acceptable)

(CONTINUED) Page 1 of 2

Registered Agent's Signature (REQUIRED)

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..

ARTICLE IV- Manager(s) or Managing Member(s): The name and address of each Manager or Managing Member is as follows: Title: Name and Address: "MGR" = Manager "MGRM" = Managing Member President Amin Hasbun 6400 NW 114 Ave #1125 Doral, Florida, 33178 Secretary Gary Pena 11357 NW 42nd Terrace Doral, Florida, 33178 Treasurer Rosanna Melo 6400 NW 114 Ave #1125 Doral, Florida, 33178 Vice-President Ana Maria Pena 11357 NW 42nd Terrace Doral, Florida, 33178 (Use attachment if necessary) **ARTICLE V:** Effective date, if other than the date of filing: (OPTION

REQUIRED SIGNATURE:

to or 90 days after the date of filing.)

Signature of a member or an authorized representative of a member.

(If an effective date is listed, the date must be specific and cannot be more than five business days prior

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

Typed 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)