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SECRETARY OF STATE

D. BRUCE

SEP 2 1 2009

EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT:

HUP Architectural, 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:

Hernando Uribe

Name of Person

HUP Architectural, LLC

Firm/Company

1673 N. W. 144th Way

Address

Pembroke Pines, Florida 33028

City/State and Zip Code

huribep@comcast.net

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

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SECRETARY OF STATE
ALLAHASSEE, FLORIDA

Herr	nando Uribe	at (954)	617-5968
Nam	e of Person	Area Code & Daytime T	elephone Number
Enclosed is a check \$125.00 Filing Fee	for the following amount: \$\square \frac{\forall}{3}\$130.00 Filing Fee & Certificate of Status	\$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

Mailing Address

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Street/Courier Address

Registration Section
Division of Corporations
Clifton Building
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:

HUP Architectural, LLC

(Must end with the words "Limited 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:

1673 N. W. 144th Way Pembroke Pines Florida 33028

1673 N. W. 144th Way Pembroke Pines Florida 33028

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

The name and the Florida street address of the registered agent are:

Hernando Uribe

Name

1673 N.W. 144th Way

Florida street address (P.O. Box NOT acceptable)

Pembroke Pines, FL 33028 City, State, and Zip

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:

Title:

Name and Address:

"MGR" = Manager

"MGRM" = Managing Member

Senior Project Manager

Andres Hollmann 1673 N.W. 144th Way

Pembroke Pines, FL 33028

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing:

POPTIONAL) (If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

REQUIRED SIGNATURE

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

(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.)

Hernando Uribe

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)