

3/29/2010

Division of Corporations

Florida Department of State
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To:

Division of Corporations
Fax Number : (850) 617-6383

From:

Account Name : HUBCO
Account Number : 104662003400
Phone : (516) 935-3940
Fax Number : (516) 935-3088

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: bc.hmc2010@yahoo.com

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TALLAHASSEE, FLORIDA

**FLORIDA LIMITED LIABILITY CO.
HMCM LLC**

Certificate of Status	1
Certified Copy	0
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D. BRUCE
MAR 30 2010
EXAMINER

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

H10000070023

ARTICLES OF ORGANIZATION
FOR
FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name

The name of the Limited Liability Company is: **HMCM 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:

Nine Island Avenue, Apt. 2010

Nine Island Avenue, Apt. 2010

Miami Beach, FL 33139

Miami Beach, FL 33139

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

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

Bjornar Hansen

Name

Nine Island Avenue, Apt. 2010

(P.O. Box or Mail Drop Box NOT Acceptable)

Miami Beach, FL 33139

(City / State / Zip)

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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 - Bjornar Hansen

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

H10000070023

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

Title:

Name and Address:

"MGR" = Manager

"MGRM" = Managing Member

MGRM


Bjornar Hansen - Nine Island Avenue, Apt. 2010, Miami Beach, FL 33139

MGRM

Cecilia Vasquez - Nine Island Avenue, Apt. 2010, Miami Beach, FL 33139

(Use attachment if necessary)

REQUIRED SIGNATURE:



Signature of a member or 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.)

Bjornar Hansen

Typed or printed name of signer

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