L10000068625

(Requestor's Name)
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SECRETARY OF STATE

COVER LETTER

TO: Registration Division of C		,	
SUBJECT: Hillcres	st, LLC		
		ted Liability Company	•
The enclosed Articles	of Organization and fee(s) are	submitted for filing.	
Please return all corres	pondence concerning this mat	tter to the following:	
Tanya Tsvey	er		
		Name of Person	
		Firm/Company	
1890 S. Ocea	an Drive, unit 1701		
		Address	
Hallandale, F	L 33009		
	Cit	ty/State and Zip Code	
BTTproduction	n@yahoo.com		
	E-mail address: (to be used	for future annual report notification)	
For further information	concerning this matter, please	e call:	
Tanya Tsveyer		at (954) 818-0760	
Name	of Person	Area Code & Daytime Telep	hone Number
Enclosed is a check for	or the following amount:		
□\$125.00 Filing Fee	□\$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 Ci Tallahassee, FL 32301	rcle



June 18, 2010

TANYA TSVEYER 1890 S. OCEAN DRIVE, UNIT 1701 HALLANDALE, FL 33009

SUBJECT: HILLCREST, LLC Ref. Number: W10000029273

We have received your document for HILLCREST, LLC and your check(s) totaling \$155.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity. Section 608.406, Florida Statutes, was amended effective July 1, 2007, to require the name of a limited liability company to be distinguishable from the names of all other filings filed with the Division of Corporations, except for fictitious name registrations and general partnership registrations.

Please select a new name and make the correction in all the appropriate places. One or more words may be added to make the name distinguishable from the one presently on file. Adding of Florida or Florida to the end of the name is not acceptable. A search for name availability can be made on the Internet through the Division's records at www.sunbiz.org.

Please note the name of a limited liability company must end with the words Limited Liability Company, the abbreviation L.L.C., or the designation LLC. The word Limited may be abbreviated as Ltd. and the word Company may be abbreviated as Co. The following suffixes are no longer acceptable: Limited Company, L.C., and LC.

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) 245-6067.

Neysa Culligan Regulatory Specialist II

Letter Number: 710A00015056

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is	s:	
1920 Hillcrest, LLC		
(Must end with the words "Limited Lia	bility Company, "L.L.C.," or "LLC.")	
ARTICLE II - Address: The mailing address and street address of the	principal office of the Limited Li	ability Company is:
Principal Office Address:	Mailing Address:	
18201 Collins Ave, unit 3401A	1890 S. Ocean Drive, unit 1701	
Sunny isles Beach, FL 33160	Hallandale, FL 33009	
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Registers business entity with an active Florida registration.) The name and the Florida street address of the Tanya Tsveyer	istered Agent. You must designate an indivi	idual or another
Nam	e	FILI HIT IARY ASSE
Hallandale, FL 33009	ddress (P.O. Box <u>NOT</u> acceptable) FL	FILED JUN 17 PM 2:55 RETARY OF STATE AHASSEE, FLORIDA
City, 9	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..

Tolly VSVOLCH
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:

Total and the second of the se

Title: "MGR" = Man "MGRM" = M	ager anaging Member	Name and Address:
MGR		Anatoliy Podlubniy - 18201 Collins Ave, unit 3401A
		Sunny isles Beach, FL 33160
MGRM		Yevgeniya Podlubnaya - 18201 Collins Ave, unit 3401A
		Sunny isles Beach, FL 33160
·		
(Use attachmen	t if necessary)	
	isted, the date must b	e date of filing: (OPTIONAte specific and cannot be more than five business day
REQUIRED S	IGNATURE:	
	J.	TALLA SECRE
	Signature of a member	er or an authorized representative of a member.
	Ø	(A= -
	of this document const that the facts stated her	ction 608.408(3), Florida Statutes, the execution itutes an affirmation under the penalties of perjury

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)

Typed or printed name of signee