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· (Re	equestor's Name)	
(Ac	ddress)	
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(Ci	ty/State/Zip/Phone #	()
PICK-UP	☐ WAIT	MAIL
(Bu	usiness Entity Name)
(De	ocument Number)	
Certified Copies	Certificates o	f Status
Special Instructions to	Filing Officer:	
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B. KOHR

JUN 6 2011

EXAMINER



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11 JUN-2 MIII: 02

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LAZARUS

CORPORATE FILING SERVICE

3320 SW 87TH AVENUE

MIAMI, FL 33165 (305) 552-5973

	·	PA PS	
		Office Use Only	PH 2: 2
ORPORATION NAME(S) & DOCI	JMENT NUMBER(S),	(if known):	
Hucyn,	CLC		
(Corporation Name)	(Document #)		,
(Corporation Name)	(Document #)		
			•
(Corporation Name)	(Document #)		
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Walk in Pick up time	2.00	Certified Copy	
☐ Mail out ☐ Will wait	Photocopy	Certificate of State	us
NEW FILINGS	<u>AMENDMENTS</u>		•
Profit	Amendment		
Not for Profit		f R.A., Officer/Director	•
Limited Liability Domestication	Dissolution/W	gistered Agent //ithdrawal	
Other	Merger		•
OTHER FILINGS	REGISTRATION	N/QUALIFICATION	
Annual Report	☐ Foreign		
Fictitious Name	Limited Partn		
	Reinstatemen	t .	••
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FLORIDA DEPARTMENT OF STATE Division of Corporations

June 2, 2011

LAZARUS

TALLAHASSEE, FL

SUBJECT: HUCYN, LLC

Ref. Number: W11000030246

MIN-S PA 2: 27

RGT BYTENDED TO ACKNOWLEDGE SUFFICIENCY OF FILING DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

2011 JUN -6 AM 11: 35

We have received your document for HUCYN, 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):

Please note that we have RETAINED your \$155.00 payment.

If your intention is to form a corporation, then the name cannot contain the "LLC" suffix. A corporation name has to have a corporation suffix -- such as INC., INCORPORATED, CORP., CORPORATION, CO., or COMPANY.

If your intention is to form a limited liability company, then you have used the correct suffix, but everything else is wrong.

Limited liability must file Articles of Organization documents, not Articles of Incorporation. LLC's don't have stock. LLC's are formed by "organizers" not "incorporators". And LLC's have MANAGERS or MANAGING MEMBERS, not officers.

We are enclosing a form that can be used to file a Florida LLC, which you may wish to use.

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) 245-6914.

Buck Kohr Regulatory Specialist II

Letter Number: 611A00013535

	OR FLORIDA LIMITED DIABILITY COMPANY
ARTICLE I - Name:	,
The name of the Limited Liability Com	pany is:
HUCYN, LLC	
(Must end with the words "Limited Liability Compu	my, "Limited Company" or their abbreviation "I.L.C.," or "IC")
ARTICLE II - Address: The mailing address and street address	of the principal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
2600 Douglas Road	2600 Douglas Road
Sulte 811	Suite 811
Coral Gables, FL 33134	Coral Gables, FL 33134
The name and the Florida street address Valentin Lopez	
	Name
2600 Douglas Ro	pad, Suite 811
Florida	street address (P.O. Box NOT acceptable)
Coral Gables, FL	FL 33134
	ly, Stete, and Zip
liability company at the place design registered agent and agree to act in this statutes relating to the proper and com	t and to accept service of process for the above stated limited thated in this certificate, I hereby accept the appointment as acapacity. I further agree to comply with the provisions of all applete performance of my duties, and I am familiar with and as registered agent as provided for in Chapter 608, F.S
Alexandra Agent	i's Signature (REQUI) BD)

(CONTINUED)
Page 1 of 2

<u>Title:</u> "MGR" = Manager	Name and Address:	
"MGRM" = Managing Membe	er	
MGRM	Hugo Manuel Rios Villagra	
	2600 Douglas Road, Suite 811	
	Coral Gables, FL 33134	
MGR	Cynthia Montserrat Rios Villa	gra
	2600 Douglas Road, Suite 811	
	Coral Gables, FL 33134	

(Use attachment if necessary)		
	an the date of filing: June 8, 2011 nust be specific and cannot be more tha	

Filing Fees:

REQUIRED SIGNATURE:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
\$ 30.00 Certified Copy (Optional)

5 5.00 Certificate of Status (Optional)

Signature of a member or an authorized regresentative 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.)