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Office Use Only



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J. SAULSBERRY EXAMINER

APR 13 2012

## **COVER LETTER**

TO: Registration Section Division of Corporations
SUBJECT: Big 6. 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:
Gregor Lah Name of Person
Big 6. LLC Firm/Company
Firm/Company
16260 123 d Tor N.
Address
Jupiter FL 33478 ST AP - City/State and Zip Code
City/State and Zip Code
City/State and Zip Code  City/State and Zip Co
For further information concerning this matter, please call:
Lynda Street at (561) 262-4819
Name of Person Area Code & Daytime Telephone Number
Enclosed is a check for the following amount:
Certificate of Status  Certificate of Status  Certificate of Status  Certified Copy (additional copy is enclosed)  Certified Copy (additional copy is enclosed)
Mailing Address  Registration Section  Registration Section  Division of Comparting

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

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:	
(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 Co	mpany is:
Principal Office Address:  Mailing Address:	
16260 123th Tol N 16260 123th Tel N  Jupiter FL 33478  Jupiter FL 33478	
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 anoth business entity with an active Florida registration.)	re: ner
The name and the Florida street address of the registered agent are:    Cregor Lah   Name   N	2012 APR 12 PM 12: 0
Name  Name    16260   128   7(v N.   128	PM Z: 01
City, State, and Zip  Having been named as registered agent and to accept service of process for the above stat liability company at the place designated in this certificate, I hereby accept the appoint registered agent and agree to act in this capacity. I further agree to comply with the provis statutes relating to the proper and complete performance of my duties, and I am familiar accept the obligations of my position as registered agent as provided for in Chapter 606  Registered Agent's Signature (REQUIRED)	nent as sions of all with and

(CONTINUED)

Title: "MGR" = Manage "MGRM" = Mana		Name and Address:
MGRM	_	6 regor Lah 16260 1235 rorn Jupiter FL 33478
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(Use attachment if	necessary)	·
LE V: Effective da	ite, if other than the	date of filing: 4912. (OPTIONAL specific and cannot be more than five business days
LE V: Effective da	ate, if other than the d, the date must be e of filing.)	
LE V: Effective da ffective date is liste days after the date  REQUIRED SIG	nte, if other than the d, the date must be e of filing.)  NATURE:  Signature of a member dance with section 608. es an affirmation under re that any false informes a third degree felony	r or an authorized representative of a member.  408(3), Florida Statutes, the execution of this document of the penalties of perjury that the facts stated herein are true. The penalties of perjury that the Department of State as provided for in s.817.155, F.S.)
LE V: Effective da ffective date is liste days after the date  REQUIRED SIG	nte, if other than the d, the date must be e of filing.)  NATURE:  Signature of a member dance with section 608. es an affirmation under re that any false informes a third degree felony	r or an authorized representative of a member.  408(3), Florida Statutes, the execution of this documents