

L12000096256

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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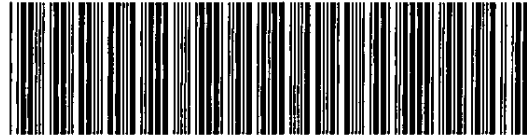
(Business Entity Name)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

J. SAULSBERRY
EXAMINER
JUL 25 2012

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: SIX VEN PARTNERS
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:

HENRIQUE L. KNOTSCHKE
Name of Person

GHEMA REALTY, LLC
Firm/Company

1900 GLADES ROAD, SUITE 353
Address

BOCA RATON, FL, 33431
City/State and Zip Code

henrykno@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Henrique L. Knotschke at (**561**) **7167816**
Name of Person Area Code & Daytime Telephone Number

Enclosed is a check for 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 Circle
Tallahassee, FL 32301

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TALLAHASSEE, FLORIDA

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

SIX VEN PARTNERS, 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:

1900 GLADES ROAD, SUITE 353
BOCA RATON, FL, 33431

Mailing Address:

1900 GLADES ROAD, SUITE 353
BOCA RATON, FL, 33431

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:

Henrique L. Knotschke

Name

1900 Glades Road, Suite 353

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

Boca Raton FL 33431

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:

"MGR" = Manager

"MGRM" = Managing Member

Name and Address:

HENRIQUE L. KNOTSCHKE MGRM

1900 GLADES ROAD, SUITE 353
BOCA RATON, FL, 33431

JUAN A. AZPURUA MGRM

2020 W. MCNAB, SUITE 112
FORT LAUDERDALE, FL, 33309

RODOLFO J. VERA MGRM

11881 HERMITAGE DRIVE
PLANTATION, FL, 33325

LIONEL R. ECHEVERRIA MGRM

21474 ST ANDREWS GRAND CIRCLE
BOCA RATON, FL, 33486

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: _____, (OPTIONAL)
(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 and the truth and accuracy of the contents hereof are true and correct.)

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