# L12000139347

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SECRETARY OF STATE ALLAHASSEE, FLORIDA

D. BRUCE
NOV 0 2 2012
EXAMINER

# **COVER LETTER**

TO: Registration Section Division of Corporations		
SUBJECT: Hernando & Horvath	LLC	
	imited Liability Company	_
The enclosed Articles of Organization and fee(s)	are submitted for filing.	
Please return all correspondence concerning this	matter to the following:	
Ferencz Horvath		
	Name of Person	
	Firm/Company	<del></del>
13606 SW 115 Lane	. mar company	
15000 SVV 115 Lane	Address	<del></del>
Miami, FL 33186		e e e e e
foronoz honyath@hatmail.com	City/State and Zip Code	12 NOV
ferencz_horvath@hotmail.co	sed for future annual report notification)	<u>≩~</u> 2 ?
For further information concerning this matter, pl	•	AN FILI
Ferencz Horvath	<sub>at (</sub> 786 <sub>) 213-4499</sub>	PHIZ: 49 PHIZ: 49 OF STATE EE, FLORIDGE
Name of Person	Area Code & Daytime Telephone Number	
Enclosed is a check for the following amount	:	
\$125.00 Filing Fee \$\sum \text{Certificate of Status}		Status &
Mailing Address Registration Section Division of Corporatio P.O. Box 6327 Tallahassee, FL 32314	Clifton Building	

Tallahassee, FL 32301

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

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The name of the Limited Liability Company is:

# Hernando & Horvath 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:	Mailing Address:
13606 SW 115 Lane Miami, FL 33186	13606 SW 115 Lane Miami, FL 33186
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Regis business entity with an active Florida registration.)	tered Agent. You must designate an individual or another NOV
The name and the Florida street address of the r	
Ferencz Horvath	<u> </u>
Name	——————————————————————————————————————
13606 SW 115 La	ane ROE 59
Florida street add	dress (P.O. Box NOT acceptable)
Miami, FL 33186	FL
City, Str	ate, 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)

# APPROVE AND FILED

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

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

MGRM	Francisco Harrando	
WIGHIVI	Francisco Hernando	
	8650 SW 109 Ave, #225 Miami, FL 33183	
MGRM	Ferencz Horvath	
	13606 SW 115 Lane	
	Miami, FL 33186	
MGRM	Miguel Horvath	
	13331 SW 88 Terr, Unit E	
	Miami, FL 33186	
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	<del></del>	—— AS
		SEE
(Use attachment if necessary)		<u>. 1</u>
LE V: Effective date, if other than th	ne date of filing:	TION E

**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 constitutes an affirmation under the penalties of perjury that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)

## Ferencz Horvath

Typed or printed name of signee

### 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)