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(Requestor's Name)		
(Address)		
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(City/Chata/Zin/Ohana 40		
(City/State/Zip/Phone #)		
PICK-UP WAIT MAIL		
(Business Entity Name)		
(Document Number)		
Certified Copies Certificates of Status		
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COVER LETTER

TO: Registration Section
Division of Corporations

DEJARO 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:

Deborah L. Acker Name of Person DEJARO 6 LLC Firm/Company Address Marathon, FL. 33050

City/State and Zip Code

dejarollc@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Deborah L. Acker at (305) 9423667

Name of Person Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

Malling 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

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

DEJARO 6 LLC	ted Liability Company, "L.L.C.," or "LLC.")
(Musi end with the words Linns	ted Liability Company, E.L.C., or EEC.)
ARTICLE II - Address:	
The mailing address and street address o	f the principal office of the Limited Liability Company
Principal Office Address:	Mailing Address:
803 124th Street Gulf	803 124th Street Gulf
Marathon, FL. 33050	Marathon, FL 33050
ARTICLE III - Registered Agent, Reg	ristered Office, & Registered Agent's Signature: wn Registered Agent. You must designate an individual or another
ARTICLE III - Registered Agent, Reg (The Limited Liability Company cannot serve as its ovalusiness entity with an active Florida registration.) The name and the Florida street address	istered Office, & Registered Agent's Signature: wn Registered Agent. You must designate an individual or another
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ARTICLE III - Registered Agent, Reg (The Limited Liability Company cannot serve as its ovalusiness entity with an active Florida registration.) The name and the Florida street address	ristered Office, & Registered Agent's Signature: Am Registered Agent. You must designate an individual or another of the registered agent are:
ARTICLE III - Registered Agent, Reg (The Limited Liability Company cannot serve as its or business entity with an active Florida registration.) The name and the Florida street address of Deborah L. Acker 803 124th Street Gulf	ristered Office, & Registered Agent's Signature: Am Registered Agent. You must designate an individual or another of the registered agent are:
ARTICLE III - Registered Agent, Reg (The Limited Liability Company cannot serve as its or business entity with an active Florida registration.) The name and the Florida street address of Deborah L. Acker 803 124th Street Gulf	ristered Office, & Registered Agent's Signature: on Registered Agent. You must designate an individual or another of the registered agent are: Name Name treet address (P.O. Box NOT acceptable)

(CONTINUED)

and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S..

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:

<u>Title:</u> "MGR" = Manager	Name and Address:	
"MGRM" = Managing Member		
MGRM	John F. LaPenta, Jr.	
	10211 Matoca Way	3 "1
	Austin, TX. 78726	
MGRM	Deborah L. Acker	THE P
	803 124th Street Gulf	"T} "144
	Marathon, Fl. 33050	# 22 Loans
		3rn 2
		
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(Use attachment if necessary)		·

ARTICLE V: Effective date, if other than the date of filing: <u>January 1, 2013</u>. (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 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.)

Deborah L. Acker

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)