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(Re	equestor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	= #)
PICK-UP	WAIT .	MAIL.
(Bu	siness Entity Nam	ne)
(Do	cument Number)	·
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer.	





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B. BOSTICK
MAR - 1 2013
EXAMINER

COVER LETTER

TO:

Registration Section Division of Corporations

SUBJECT:

Hohmann Real Estate Holdings, 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:

Aleksar	ndra Krasinsk	i				
<u> </u>		Name of Person				
STA-IS						
	,	Firm/Company				
1275 B	arclay Blvd.					
		Address				
Buffalo	Grove, IL 600)89				
	Cit	y/State and Zip Cod	le		MA Marian	<u> </u>
Aleksandr	a.Krasinski@STA					——————————————————————————————————————
	E-mail address: (to be used	for future annual rep	ort notification)			<u> </u>
For further information	concerning this matter, please	call:			ij.	28
Aleksandra	a Krasinski	847	,495-30)76	ÇN ; →	AH IO: 4
Name	of Person	Area Cod	e & Daytime Telep	hone Number	AGIE A	64:
Enclosed is a check f	or the following amount:					
□\$125.00 Filing Fee	□\$130.00 Filing Fee & Certificate of Status	S155.00 Fili Certified Co (additional co)	~	\$160.00 Fi Certificate Certified C (additional c	of Stati	us &
	Mailing Address Registration Section Division of Corporations	Registra	Courier Address tion Section of Corporations			

Division of Corporation: 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

Hohmann Real Esta		ited Liability Company, "L.L.C.," or "LLC.")	
	(Musi end with the words Limi	ned Liability Company, L.L.C., or LLC.	
ARTICLE II -	Address:		
The mailing add	iress and street address of	of the principal office of the Limited Li	ability Company is:
Principal Offic	e Address:	Mailing Address:	
6892 Corral Circle		6892 Corral Circle	
Sarasota, FL 34243		Sarasota, FL 34243	
The name and the	he Florida street address John Hohmann	of the registered agent are:	FEB 28
		Name	FLAT W
	6892 Corral Circle		AM 10: 49
	Florida	street address (P.O. Box <u>NOT</u> acceptable)	9
	Sarasota	_{FL} 34243	E A
		City, State, and Zip	
liability com registered age all statutes re	pany at the place designant ent and agree to act in this elating to the proper and a	and to accept service of process for the ated in this certificate, I hereby accept to is capacity. I further agree to comply we complete performance of my duties, and on as registered agent as provided for in	he appointment as ith the provisions of I I am familiar with

(CONTINUED)

Registered Agent's Signature (REQUIRED)

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:	Name and Address:
"MGR" = Manager	
"MGRM" = Managing Member	•
MGR	John Hohmann
	6892 Corral Circle
	Sarasota, FL 34243
MGR	Linda Hohmann
	6892 Corral Circle
	Sarasota, FL 34243
	And the Park to the second of
	nan the date of filing: (OPTIONAL
CLE V: Effective date, if other th	e must be specific and cannot be more than five business
LE V: Effective date, if other the	e must be specific and cannot be more than five business
LE V: Effective date, if other the effective date is listed, the date or 90 days after the date of fili	e must be specific and cannot be more than five business
LE V: Effective date, if other the effective date is listed, the date or 90 days after the date of filing required SIGNATURE:	e must be specific and cannot be more than five businessing.)
ELE V: Effective date, if other the effective date is listed, the date of or 90 days after the date of filing response signature of a signatu	member or an authorized representative of a member. tion 608.408(3), Florida Statutes, the execution of this document on under the penalties of perjury that the facts stated herein are true. the information submitted in a document to the Department of State of felony as provided for in \$ 817,155 F.S.)
ELE V: Effective date, if other the effective date is listed, the date of or 90 days after the date of filing response signature of a signatu	member or an authorized representative of a member. in 608.408(3), Florida Statutes, the execution of this document in under the penalties of perjury that the facts stated herein are true. In the information submitted in a document to the Department of State in formation submitted in a sub
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