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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

15 JUN 29 PM 2:17

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AND
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1A

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: HyCap Properties, 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:

David Donnelly

Name of Person

HyCap Properties, LLC

Firm/Company

201 Columbine Street, Ste. 300

Address

Denver, Colorado 80206

City/State and Zip Code

daviddonnelly@hermangroup.net

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

For further information concerning this matter, please call:

David Donnelly

303

220-6273

at ()

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 Address

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

APPROVED
AND
FILED

15 JUN 29 PM 2:47

ARTICLE I - Name:

The name of the Limited Liability Company is:

HyCap Properties, LLC

(Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")

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TALLAHASSEE, FLORIDA

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:

20801 Biscayne Blvd., Ste. 403
Aventura, Florida 33180

Mailing Address:

201 Columbine Street, Ste. 300
Denver, Colorado 80206

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:

Roger A. Herman

Name

20801 Biscayne Blvd., Ste. 403

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

<u>Aventura</u>	<u>FL</u>	<u>33180</u>
City	State	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 605, F.S.


Registered Agent's Signature (REQUIRED)

(CONTINUED)

ARTICLES OF ORGANIZATION
FOR
HYCAP PROPERTIES, LLC
EXHIBIT A

<u>Title:</u>	<u>Name and Address:</u>
MGR	Janet Clement P.O. Box 2272 San Pedro, California 90731
MGR	Adam Sachs 1000 North Green Valley Parkway Suite 400-261 Henderson, Nevada 89074
MGR	Roger A. Herman 201 Columbine Street, Ste. 300 Denver, Colorado 80206
MGR	Jerry Wenzel 201 Columbine Street, Ste. 300 Denver, Colorado 80206
MGR	Ryan Harris 18543 Devonshire Street, #260 Northridge, California 91324

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ARTICLE IV-

The name and address of each person authorized to manage and control the Limited Liability Company

15 JUN 99 PM 2:48

Title:

"AMBR" = Authorized Member

"MGR" = Manager

See Attached Exhibit A

Name and Address:

See Attached Exhibit A

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TALLAHASSEE, FLORIDA

(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.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

ARTICLE VI: Other provisions, if any.

REQUIRED SIGNATURE:



Signature of a member or an authorized representative of a member.

(In accordance with section 605.0203 (1) (b), 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.)

Roger A. Herman

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)