

# LU3000022426

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

☐ PICK-UP    ☐ WAIT    ☐ MAIL

\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

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June 19, 2003

**CORPORATION NAME (S) AND DOCUMENT NUMBER (S):**

Sharma, L.L.C.

**Filing Evidence**

☒ Plain/Confirmation Copy

☐ Certified Copy

**Retrieval Request**

☐ Photocopy

☐ Certified Copy

**Type of Document**

☐ Certificate of Status

☐ Certificate of Good Standing

☐ Articles Only

☐ All Charter Documents to Include  
Articles & Amendments

☐ Fictitious Name Certificate

☐ Other

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NEW FILINGS	
	Profit
	Non Profit
X	Limited Liability
	Domestication
	Other

AMENDMENTS	
	Amendment
	Resignation of RA Officer/Director
	Change of Registered Agent
	Dissolution/Withdrawal
	Merger

OTHER FILINGS	
	Annual Reports
	Fictitious Name
	Name Reservation
	Reinstatement

REGISTRATION/QUALIFICATION	
	Foreign
	Limited Liability
	Reinstatement
	Trademark
	Other

**ARTICLES OF ORGANIZATION OF SHARMA, L.L.C.**

**Article I**

**Name**

The name of the Limited Liability Company is: SHARMA, L.L.C.

**Article II**

**Address**

The mailing address and street address of the principal office of the Limited Liability Company is: One S.E. Third Avenue, Suite 960, Miami, Florida 33131.

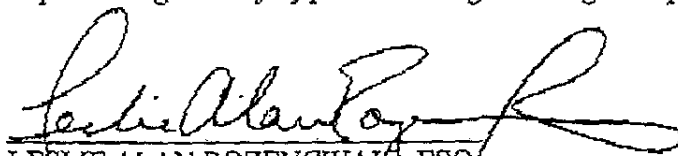
**Article III**

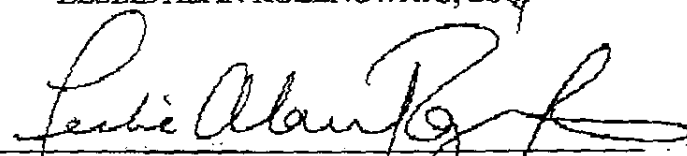
**Registered Agent**

The name and the Florida street address of the registered agent are:

Leslie Alan Rozenewaig, P.A.  
One S.E. Third Avenue, Suite 960  
Miami, Florida 33131

*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.*

  
LESLIE ALAN ROZENCWAIG, ESQ.

  
Signature of Member/authorized representative of Member  
(In accordance with Section 608.408(3), Florida Statutes,  
the execution of this affidavit constitutes an affirmation under  
the penalties of perjury that the facts stated herein are true)

LESLIE ALAN ROZENCWAIG

Typed or printed name of Signee

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