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(RE	equestor's Name)	
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PICK-UP	☐ WAIT	MAIL
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Certified Copies	Certificates	of Status
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Special Instructions to	Filing Officer:	
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1007 MAY 15 AM 9: 36 SECRETARY OF STATE ALLAHASSEE, FLORIDA



ACCOUNT NO. : 072100000032
REFERENCE: 899113 11663B
AUTHORIZATION:
COST LIMIT : \$ 100.00
ORDER DATE: May 15, 2007
ORDER TIME : 1:11 PM
ORDER NO. : 899113-005
CUSTOMER NO: 11663B
DOMESTIC FILING
NAME: AKIN II, LLC
EFFECTIVE DATE:
ARTICLES OF INCORPORATION CERTIFICATE OF LIMITED PARTNERSHIP ARTICLES OF ORGANIZATION
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:
XX CERTIFIED COPY PLAIN STAMPED COPY XX CERTIFICATE OF GOOD STANDING
CONTACT PERSON: Joyce Markley - EXT. 2930
EXAMINER'S INITIALS.

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Com	npany is:
AKIN II, LLC	
(Must end with the words "Limited Liability Compa	any, "Limited Company" or their abbreviation "LLC," or "L.C.,")
ARTICLE II - Address: The mailing address and street address  Principal Office Address:	of the principal office of the Limited Liability Company is  Mailing Address:
6573 Landings Court Boca Raton, FL 33496	6573 Landings Court Boca Raton, FL 33496
	egistered Office, & Registered Agent's Signature: own Registered Agent. You must designate an individual or another
The name and the Florida street address	s of the registered agent are:

Mahesh M. Ubero	<u> </u>
	Name
6573 Landings Co.	urt
Florida str	reet address (P.O. Box NOT acceptable
Boca Raton	<sub>FL</sub> 33496
City,	State, 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..

/s/ Mahesh M. Uberoi

Registered Agent's Signature (REQUIRED)

(CONTINUED) Page 1 of 2 2007 MAY 15 AM 9: 36

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	ег
MGRM	Mahesh M. Uberoi
	6573 Landings Court Boca Raton, FL 33496
MGRM	Madhu Uberoi
	6573 Landings Court
	Boca Raton, FL 33496
(Use attachment if necessary)	
LEV: Effective date, if other the	han the date of filing: (OPTIONAL)
ffective date is listed, the date in days after the date of filing.)	must be specific and cannot be more than five business days prior
REQUIRED SIGNATURE:	
/s/ Ma	ahesh M. Uberoi
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.)

Mahesh M. Uberoi

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)