

L15000094320

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP  WAIT  MAIL

(Business Entity Name)

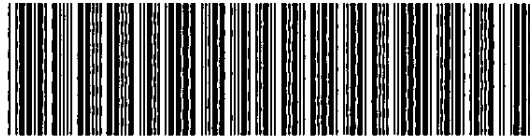
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

W15-35077

Office Use Only



500273314415

05/28/15--01024--020 \*\*160.00

FILED  
2015 MAY 29 PM 4: 17  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

JUN 01 2015

J. BRUCI



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

May 29, 2015

MRUGANK C. SHAH  
5778 SAN MARTINO ST  
MILTON, FL 32583

SUBJECT: SHAH & ASSOCIATES, L.L.C. (DBA PRESSED4TIME)  
Ref. Number: W15000038077

We have received your document for SHAH & ASSOCIATES, L.L.C. (DBA PRESSED4TIME) and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 620.169, Florida Statutes, requires foreign limited partnerships qualifying to transact business in the state of Florida submit the application and affidavit provided by the Department of State.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Deborah Bruce  
Regulatory Specialist II

Letter Number: 015A00011341

SECRETARY OF STATE  
TALLAHASSEE FLORIDA

2015 MAY 29 PM 4:17

FILED

**COVER LETTER**

**TO: Registration Section  
Division of Corporations**

**SUBJECT:** SHAH & ASSOCIATES, L.L.C.  
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:

MRUGANK C. SHAH  
Name of Person

SHAH & ASSOCIATES, L.L.C.  
Firm/Company

5778 SAN MARTINO ST  
Address

MILTON, FL. 32583  
City/State and Zip Code

mrugank53@gmail.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

MRUGANK C. SHAH at 850 380-3758  
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

**FILED**  
 2015 MAY 29 PM 4:17  
 TALLAHASSEE FLORIDA  
 DIVISION OF STATE

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

SHAH & ASSOCIATES, L.L.C.

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

ARTICLE II - Address:

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

**Principal Office Address:**

5778 SAN MARTINO ST  
MILTON, FL. 32583

**Mailing Address:**

5778 SAN MARTINO ST.  
MILTON, FL. 32583

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:

MRUGANK C.SHAH

Name

5778 SAN MARTINO ST.

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

MILTON

FL

32583

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..*

*Mrshah*

Registered Agent's Signature (REQUIRED)

(CONTINUED)

FILED  
2015 MAY 29 PM 4:17  
TREASURY OF STATE  
TALLAHASSEE FLORIDA

**ARTICLE IV-**

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

**Title:**

"AMBR" = Authorized Member

"MGR" = Manager

AMBR

**Name and Address:**

CONSTANCE M. SHAH

5778 SAN MARTINO ST

MILTON, FL. 32583

(Use attachment if necessary)

**ARTICLE V:** Effective date, if other than the date of filing: MAY 25, 2015 (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:**

*Mr. Shah*

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.)

MRUGANK C. SHAH

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)

FILED  
2015 MAY 29 PM 4:17  
CLERK OF STATE  
TALLAHASSEE FLORIDA