

L23 000 527342

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

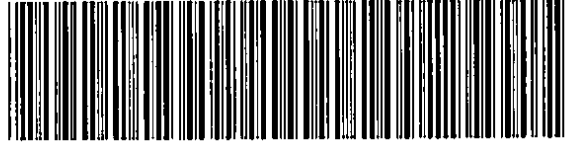
(Business Entity Name)

(Document Number)

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OFFICE OF STATE  
TALLAHASSEE, FLORIDA

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Incorporating Services, Ltd.

1540 Glenway Drive  
Tallahassee, FL 32301  
850.656.7956  
Fax: 850.656.7953  
www.incserv.com  
e-mail: accounting@incserv.com



**ORDER FORM**

**TO** Florida Department of State  
The Centre of Tallahassee  
2415 North Monroe Street, Suite 810  
Tallahassee, FL 32303  
corphelp@dos.myflorida.com  
850-245-6051

**FROM** Melissa Moreau  
mmoreau@incserv.com  
850.656.7953

**REQUEST DATE** 11/28/2023

**PRIORITY** Regular Approval

**OUR REF # (Order ID#)** 1200991

**ORDER ENTITY**  
KASHI KAPALI LLC

**PLEASE PERFORM THE FOLLOWING SERVICES:**

KASHI KAPALI LLC (FL)

New LLC filing

**NOTES:**

\$125.00 Authorized  
Email address for annual report reminders: filings@accumera.com

**RETURN/FORWARDING INSTRUCTIONS:**

ACCOUNT NUMBER: 120050000052

Please bill the above referenced account for this order.

If you have any questions please contact me at 656-7956,

Sincerely,

A handwritten signature in black ink, appearing to be the initials "MM" or similar, written in a cursive style.

Please bill us for your services and be sure to include our reference number on the invoice and courier package if applicable. For UCC orders, please include the thru date on the results.

Articles of Organization  
Of  
Kashi Kapali LLC

*(Pursuant to Section 605.0201, Florida Statutes)*

1. The name of the Limited Liability Company is: **Kashi Kapali LLC**
- 2.
3. The street address of the principal office of the Limited Liability Company is:

**16 W. 46th Street, Fl. 8, New York, NY 10036**

4. The mailing address of the Limited Liability Company is:

**16 W. 46th Street, Fl. 8, New York, NY 10036**

5. The name and address of the registered agent is as follows:

**Incorporating Services, Ltd., 1540 Glenway Drive, Tallahassee, FL 32301**

6. The period of duration for the Limited Liability Company shall be perpetual.

7. The name and address of the person(s) authorized to manage the LLC:

Title:        **AMBR**  
Name:       **Tulsiram Kheskwani**  
Address:   **77 Cariso Ct., Closter, NJ 07624**

Title:        **AMBR**  
Name:       **Karishma Kheskwani**  
Address:   **776 6th Ave., Apt. 33K, New York, NY 10001**

Title:        **AMBR**  
Name:       **Rahul Kheskwani**  
Address:   **77 Cariso Ct., Closter, NJ 07624**

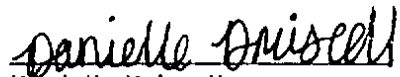
Title:        **AMBR**  
Name:       **Anand Makhija**  
Address:   **82 Vista Delmar, Drax Hall, St. Ann, Jamaica**

Title:        **AMBR**  
Name:       **Sneha Kheskwani**  
Address:   **77 Cariso Ct., Closter, NJ 07624**

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In Witness Whereof, this document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. 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.

Dated: **November 28, 2023**

A handwritten signature in black ink that reads "Danielle Driscoll". The signature is written in a cursive style with a horizontal line underneath the name.

Danielle Driscoll

Accumera LLC

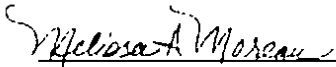
Authorized Representative

Acceptance of Appointment as Registered Agent  
of

**Kashi Kapali LLC**

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 am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S.

Dated: **November 28, 2023**



\_\_\_\_\_  
**Incorporating Services, Ltd., Registered Agent**

2023 11 29 10:30:01