BIIODODOIL

(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:			

Office Use Only

EXAMINER



200187264612

11/29/10--01032--008 **1061.25

IT APR -7 PHIZ: 43
SECRETARY OF STATE
TALLIAHASSEE, FLORIDA

J10.55990



FLORIDA DEPARTMENT OF STATE Division of Corporations

December 2, 2010

NAGARDUN NARRA 4616 9TH ST LUBBOCK, TX 79416

SUBJECT: SAI FINANCIAL LTD Ref. Number: W10000055990 (alled 18/11

We have received your document for SAI FINANCIAL LTD and your check(s) totaling \$1061.25. However, the enclosed document has not been filed and is being returned for the following correction(s):

The certificate of existence must be issued within the last 90 days by the Secretary of State which has custody of the records in the jurisdiction under the laws of which the above listed entity is incorporated/organized.

Every corporation, limited partnership, general partnership, limited liability company or trust listed as a general partner of a limited partnership, general partnership, or registered limited liability limited partnership must have an active registration/filing on file with this office before this filing can be completed. We are enclosing the appropriate instructions and/or forms for your convenience.

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) 245-6851.

Gina McLeod Regulatory Specialist II

Letter Number: 510A00028042

Called 3/25 @ 3:40

left new.

8 4/1/11

902 2288

COVER LETTER

	ration Section on of Corporations		
SUBJECT:	SAI FINANCI	AL LTD.	
<u></u>	Name of Florida Limited Par	tnership or Limited Liability	Limited Partnership
The enclosed	Certificate of Limited Partner	ship and fees are submi	tted for filing.
Please return a	all correspondence concerning	g this matter to:	
NAG	AROUN NARRA		SECRE ALL'AH
_	Contact Person		HAS.
SAI	FINANCIAL	LTD	SEE
	Firm/Company		20 21
4	616, 915 ST Address		- OR
	Address		DA TE
LUB	BOCK TX 79 City, State and Zip Code	416	
na	ress: (to be used for future annual re	mail com.	
For further inf	ormation concerning this mat	ter, please call: 190	7 1400
NAGA	ormation concerning this mat PLOUN NARRA f Contact Person	at (806) 25	2 1567
Name o	f Contact Person	Area Code and Daytin	ne Telephone Number
	check for the following amou	806 .72	2 1566
\$1,000.00 Fili (\$965 Filing F \$35 Registered Fee)	ee and and Certificate of	\$1,052.50 Filing Fees and Certified Copy	\$1,061.25 Filing Fees, Certified Copy, and Certificate of Status
STREET AD	DRESS:	MAILING AI	DDRESS:
Registration S		Registration Se	
Division of Co	•	Division of Co	•
Clifton Buildin	ng re Center Circle	P. O. Box 6323 Tallahassee, Fl	
Tallahassee, F		· minimusely i	

CR2E030 (01/06)

APPLICATION BY FOREIGN LIMITED PARTNERSHIP OR LIMITED LIABILITY LIMITED PARTNERSHIP TO TRANSACT BUSINESS IN FLORIDA

, SAI FINANCIAL LTD			
(Name of Limited Partnership or Limited Liability Lin Acceptable Limited Partnership suffixes: Limited Partnership, Lim Acceptable Limited Liability Limited Partnership suffixes: Limited	rited, L.P., LP, or Ltd.		
	limited liability limited partnership proposes to reg	gister to transact	
2. TEXAS	3		
State or Country of Formation	Date of Formation		
4. Name of Registered Agent for Service of Process and Florida	Street Address:		
MICHILA C. NARRA			
15410 OLD STATE ROAD	4 A		
SUGAR LOAF KEY, FLORIDA	4 3304'		
 I hereby accept the appointment as registered agent and agree to of all statutes relative to the proper and complete performance of my position as registered agent. 	o act in this capacity. I further agree to comply wi of my duties, and I am familiar with and accept the	obligations of	
Signature of Ro	egistered Agent	Nari	
7. Principle Office: (Florida Street Address) 8. M	siling Address:	·	
15410, OLD STATE ROAD 4A	4616 915 ST		
	LUBBOCK		
FL 33042	TX 79416		
9. If limited partnership is a limited liability limited partnershi	p, check box		
10. Name, principal office address, and mailing address of each	general partner:	ZS: →	
10. Name, principal office address, and mailing address of each NAGAI2コロム NA Name of General Pariner: SRI MANAGEMENT	Name of General Partner:	C A	و ۽ پايدسور
Street Address: A616 919 ST		ASA ASA	********
LUBBOCK PX 70	3416	7 P	
Mailing Address: 4616 915 ST		FEST IN	D
	9416	AIE RIDE	
Name of General Partner:	Name of General Partner:		
Street Address:	Street Address:		
Mailing Address:	Mailing Address:		
Mailing Address:			

Name of General Partner:	Name of General Partner:
Street Address:	Street Address:
Mailing Address:	Mailing Address:
11. Effective date, if other than the date of filing: (Effective date cannot be prior to nor more than 90 days after to	he date this document is filed by the Florida Department of State.)
Florida Department of State, by the Secretary of State or other of the law of which it is organized.	more than 90 days prior to the delivery of this application to the official having custody of the entity's records in the jurisdiction under
Signed this O6 day of AP21 L	20 \
Signed this O6 day of AA21 L Naga 7 Signature	e of a general partner

The individual signing this document affirm that the facts stated herein are true and the individual is aware that 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.

Filing Fees:

\$1,000.00 (\$965 Piling Pee and \$35 Registered Agent Fee)

Certified Copy (optional): Certificate of Status (optional):

\$52.50

\$8.75

Page 2 of 2

والمراجع يشوه ممهداتها أأرار

Corporations Section P.O.Box 13697 Austin, Texas 78711-3697



Hope Andrade Secretary of State

Office of the Secretary of State

Certificate of Fact

The undersigned, as Secretary of State of Texas, does hereby certify that according to the most recent information in the records of this office the following persons are listed as managerial officials for SAI FINANCIAL, LTD, a Domestic Limited Partnership (LP), file number 801373408.

NARRA NAGARJUN General Partner 4616 9th Street Lubbock Texas USA 79416

In testimony whereof, I have hereunto signed my name officially and caused to be impressed hereon the Seal of State at my office in Austin, Texas on February 18, 2011.



Hope Andrade Secretary of State



Texas Comptroller of Public Accounts

SUSAN COMBS · COMPTROLLER · AUSTIN, TEXAS 78774

January 27, 2011

CERTIFICATE OF ACCOUNT STATUS

THE STATE OF TEXAS COUNTY OF TRAVIS

I, Susan Combs, Comptroller of Public Accounts of the State of Texas, DO HEREBY CERTIFY that according to the records of this office

SAI FINANCIAL, LTD

is, as of this date, in good standing with this office having no franchise tax reports or payments due at this time. This certificate is valid through the date that the next franchise tax report will be due May 15, 2012.

This certificate does not make a representation as to the status of the entity's registration, if any, with the Texas Secretary of State.

This certificate is valid for the purpose of conversion when the converted entity is subject to franchise tax as required by law. This certificate is not valid for any other filing with the Texas Secretary of State.

GIVEN UNDER MY HAND AND SEAL OF OFFICE in the City of Austin, this 27th day of January 2011 A.D.

Susan Combs

Texas Comptroller

Taxpayer number: 32043456204 File number: 0801373408

Form 05-304 (Rev. 12-07/17)

Certificate of Account Status - Letter of Good Standing

From: Nikhila Narra (nikhilanarra@me.com)

Sent: Wed 4/06/11 8:52 AM

To: Mommy Narra (Mom's Cell) (knarramd@hotmail.com)

| X | Texas Comptroller of Public Accounts Letterhead

April 6, 2011

CERTIFICATE OF ACCOUNT STATUS

THE STATE OF TEXAS COUNTY OF TRAVIS

I, Susan Combs, Comptroller of Public Accounts of the State of Texas, DO HEREBY CERTIFY that according to the records of this office

SAI FINANCIAL, LTD

is, as of this date, in good standing with this office having no franchise tax reports or payments due at this time. This certificate is valid through the date that the next franchise tax report will be due May 15, 2012.

This certificate does not make a representation as to the status of the entity's registration, if any, with the Texas Secretary of State.

This certificate is valid for the purpose of conversion when the converted entity is subject to franchise tax as required by law. This certificate is not valid for any other filing with the Texas Secretary of State.

GIVEN UNDER MY HAND AND SEAL OF OFFICE in the City of Austin, this 6th day of April 2011 A.D.

X.

Susan Combs Texas Comptroller

Taxpayer number: 32043456204 File number: 0801373408

Form 05-304 (Rev. 12-07/17)