L000006848

Raj Jagopat
P.O. Box 670545
Coral Springs, FL 33067
954-917-6441

City/State/Zip

Phone #

Office Use Only

Examiner's Initials

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

(Corporation Name)	(Document #)
,	8000032558484 -06/12/0001139008
(Corporation Name)	(Document #) *****125.00 ****125.00
(Corporation Name)	(Document #)
(Corporation Name)	(Document #)
☐ Walk in ☐ Pick up time	Certified Copy
☐ Mail out ☐ Will wait	☐ Photocopy ☐ Certificate of Status
NEW FILINGS Profit Not for Profit Limited Liability Domestication Other	AMENDMENTS Amendment Resignation of R.A., Officer/Director Change of Registered Agent Dissolution/Withdrawal Merger
OTHER FILINGS	REGISTRATION/QUALIFICATION TO THE
☐ Annual Report ☐ Fictitious Name	Foreign Limited Partnership Reinstatement Trademark Other

CR2E031(7/97)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:				
The name of the Limited Liability Con	npany is:			·
Railight Cultur	npany is: RAL PROMOTIONS LTD C	0	-	
ARTICLE II - Address:	of the principal office of the Limited Liabilit	v Comr	any is	
The maining address and street address	of the principal office of the Emilied Endome	y comp	ruily xo:	544.2 = ma
PO BOX BINGS F	733067			
CORACSTONE			÷	· · · · · · · · · · · · · · · · · · ·
ARTICLE III - Registered Agent, R	egistered Office, & Registered Agent's Sign	ıature:		
,				
The name and the Florida street address	ss of the registered agent are:			
	11-The TOLOPATE	. 1	· · · · · · · · · · · · · · · · · · ·	
- Ra	Nome Name	£ .	ب ،ست	
49/21	Name 1 LIGHTHOUSE CITCLE AP	厂丁	,COC	30/201
Florida st	reet address (P.O. Box NOT acceptable)		Chi	
	TT	-1*	J-C.	770
	City, State, and Zip 33065			
Uming home named as varietared again	t and to accept service of process for the above s	stated liv	nited	
liability company at the place designate	ed in this certificate, I hereby accept the appoint	ment as	registere	ed
agent and agree to act in this capacity	I further agree to comply with the provisions of	f all stati	utes	
relative to the proper and complete per	formance of my duties, and I am familiar with a	md acce	pt the	
ohligations of my position as registered	agent as provided for in Chapter 608, F.S	•	1	
conganions of my Fermion and again		-	•	= :
	1 ragoful		00	
	Registered Agent's Signature		ć	
	(La Company	
Article IV - Management (Check b		2	Date i	: <u> </u>
	is to be managed by one manager or more ma	inagers	and is,	•
therefore, a manager - managed com-	pany.	eres (p. 1)	<u> </u>	a
				•
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(An additional article	must be added if an effective date is requested	ed)		
(7111 additional arrore	V Sand I			
Signature of a mem	ber or an authorized representative of a member.			, J
· ·				
	section 608.408(3), Florida Statutes, the execution institutes an affirmation under the penalties of perjury			et .
that the facts stated				
\mathcal{O}_{Λ}	DATTIE JACAPAT			- - -
$\underline{\hspace{1cm}}$ KBJ	PATTIE JAG-OPAI Typed or printed name of signee			, 10,000
				-
	Filing Fees:			

\$100.00 Filing Fee for Articles of Organization \$ 25.00 Designation of Registered Agent \$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)