Requester's Name 1047 NU 10 AVE. Address Coval Springs FL 32 City/State/Zip Phone #		bes d	MJH
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NEW FILINGS	AMENDMENTS		-
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Limited Liability	Resignation of R.A., Change of Registere	d Agent 👌	FIL JUL -5
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OTHER FILINGS	REGISTRATION/QUA		ED PM 4: 37
 Annual Report Fictitious Name 	 Foreign Limited Partnership Reinstatement Trademark Other 	- · ·	
		Examiner's Initia	ls

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FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

June 21, 2001

INDIGOLD LTD. 1047 NW 116 AVE. CORAL SPRINGS, FL 33071

SUBJECT: INDIGOLD LTD. Ref. Number: W01000014307

We have received your document for INDIGOLD LTD. and your check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of a Limited Liability Company must end with the words "limited company", "limited liability company" or their abbreviation "L.C." or "L.L.C."

The name of the entity cannot include "." This word/abbreviation is readily associated with or is commonly used to denote another type of entity. Please amend your document throughout accordingly.

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) 487-6051.

Michelle Hodges Document Specialist

Letter Number: 901A00037715

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

/11.1.0 NOTGOLD * **ARTICLE I - Name:** _ Indigold L.L.C. The name of the Limited Liability Company is: INDIGOLD

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is: 1047 NW 116 AVENUE

CORAL SPRINGS , FL 33071

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

The name and the Florida street address of the registered agent are:

SUNIL SONI				
1047	NW 116	Avenue		
Florida street	address (P.O. Box	NOT acceptable)		
	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..

Registered Agent's Signature

Article IV - Management (Check box if applicable.)

The Limited Liability Company is to be managed by one manager or more managers and is, therefore, a manager - managed company.

Signature of a member or an authorized representative of a member.	'≥∽	0	
signature of a memoer of an authorized representative of a memoer.		Ę	
(In accordance with section 608.408(3), Florida Statutes, the execution	ΞĔ	UL.	
of this document constitutes an affirmation under the penalties of perjury	SS	1	
hat the facts stated herein are true.)	YSS A	വ	_
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Typed or printed name of signee	- S	÷	
	RA.		
Filing Fees:	57	3	
\$100.00 Filing Fee for Articles of Organization	A		
\$ 25.00 Designation of Registered Agent			
\$-30.00 Certified Copy (Optional)*			
\$ 5.00 Certificate of Status (Optional)			