

LO10660014427

To,

REGISTRATION SECTION 8/22
DIVISION OF CORPORATIONS
PO BOX -6327
TALLAHASSEE, FL-32314

MJH

From,

JASTOT PAUL SINGH
182, E. RIVER BEND DR
SUNRISE FL-33326
PH # (954) 349-1769

600004549196--0
-08/22/01--01074--011
***125.00 ***125.00

2851

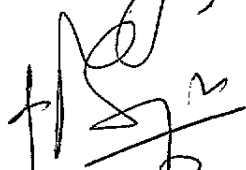
Dear Sir/Madam,

Please file the following
articles under LLC.

My name & mailing address in
mentioned above.

Thank you.

Sincerely,



JASTOT PAUL SINGH

01 AUG 22 PM 2:17
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is: IK ASSOCIATES, LLC.

ARTICLE II - Address:

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

182, E. RIVERBEND DR.
SUNRISE, FL 33326

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

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

JASJOT PAUL SINGH

Name

182, E. RIVERBEND DR.

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

SUNRISE FL 33326

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.

[Signature]
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.

(An additional article must be added if an effective date is requested)

[Signature]
Signature of a member or an authorized representative of a member.

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

SUNITEE SINGH

Typed or printed name of signer

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)

FILED
01 AUG 22 PM 2:17
SECRETARY OF STATE
TALLAHASSEE, FLORIDA