

L02000018480

Requester's Name

F. M. JABALPOREWALA

7000 N.W., 186 STREET, #417
MIAMI, FL 33015, U.S.A.

600006058856--7

-06/27/02--01023--015

****100.00 ****100.00

Office Use Only

IBER(S), (if known):

305 827 4583

1. IT Plaza LLC
(Corporation Name) (Document #)

600006058856--7

-07/23/02--01016--007

*****25.00 *****25.00

2. _____
(Corporation Name) (Document #)

3. _____
(Corporation Name) (Document #)

4. _____
(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

- ☐ Annual Report
- ☐ Fictitious Name

REGISTRATION/QUALIFICATION

- ☐ Foreign
- ☐ Limited Partnership
- ☐ Reinstatement
- ☐ Trademark
- ☐ Other

CR2E031(7/97)

Examiner's Initials

FILED
02 JUL 22 AM 9:52
TALLAHASSEE, FLORIDA

W02-18948
7/23
M0

855, 676, 671



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State

June 28, 2002

F.M. JABAL POREWALA
7000 N.W. 186 STREET #417
MIAMI, FL 33015

SUBJECT: IT PLAZA LLC
Ref. Number: W02000018948

FILED
02 JUL 22 AM 9:52
TALLAHASSEE, FLORIDA

We have received your document for IT PLAZA LLC and your check(s) totaling \$100.00. However, the document has not been filed and is being retained in this office for the following:

There is a balance due of \$25.00.

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) 245-6097.

Marsha Thomas
Document Specialist

Letter Number: 102A00041376

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

IT Plaza LLC

ARTICLE II - Address:

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

7000 N.W., 186 Street, # 417 MIAMI, FL 33015, U.S.A.

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

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

F M Jabalporewala

Name

7000 N.W., 186 Street, # 417

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

MIAMI FL 33015

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.)

F M JABALPOREWALA.

Typed or printed name of signee

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
02 JUL 22 AM 9:52
TALLAHASSEE, FLORIDA