

8712102  
**LO2000021294**

PRAFULLA K. N. PATEL

11186, MARITIME COURT

WELLINGTON, FL 33467

PHONE: 561-798 2697

Dear Sir / Madam,

600007205856--7  
-08/19/02--01081--004  
\*\*\*160.00 \*\*\*160.00

Enclosed Pl find Articles of  
Organization for ANOOP ENTERPRISES, L.L.C.  
along with our check for \$160<sup>00</sup>/<sub>100</sub> being  
filing fee, designation of Registered  
Agent, certified copy and Certificate  
of Status -

Please also mindful -  
you may contact me  
the above form

Thanks

P. Patel

P.M. Patel

FILED  
02 AUG 19 AM 11:09  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY**

**ARTICLE I - Name:**

The name of the Limited Liability Company is:

ANOOP ENTERPRISES, L.L.C.

**ARTICLE II - Address:**

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

11186 MARITIME COURT  
WELLINGTON, FL 33467

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

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

NIRANJAN PATILAK

Name

552 S.W. BUSWELL AVE,

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

PT. ST. LUCIE FL 34983

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.*

*Niranjan Patilak*

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)

*P. Patel*

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.)

PRAFULCHANDRA N. PATEL

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 JUN 19 AM 11:09  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA