L04000046396

(Requestor's Name)

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WOK 14610

L04-46396

FLORIDA DEPARTMENT OF STATE
Glenda E. Hood
Secretary of State

May 20, 2004

RHONDA CAMPBELL ALBANESE
3314 HENDERSON BLVD., SUITE G
TAMPA, FL 33609

SUBJECT: ATMA SHAKTI LLC
Ref. Number: W04000019610

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

There is a balance due of $25.00. Refer to the attached fee schedule for the breakdown of fees. Please return a copy of this letter to ensure your money is properly credited.

The fees to file a Florida Limited Liability Company or register a Foreign Limited Liability Company are as follows: $100 filing fee; and $25 registered agent designation fee. Please include an additional $30 for each certified copy requested (optional) and $5.00 for each certificate of status requested (optional).

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) 245-6020.

Tammi Cline
Document Specialist

Letter Number: 004A00035722

FILED

May 3, 2004

Atma Shakti, LLC
Rhonda Campbell Albanese
3314 Henderson Blvd
Suite 100 G
Tampa, Florida 33609

Division of Corporations
PO Box 6327
Tallahassee, Florida 32314

To Whom It May Concern:

Enclosed please find the registrations papers and check for the Articles of Organization for my new company Atma Shakti, LLC.

It is deeply important to me that this company is "born" at 1:00 on May 17, 2004. While Astrology and the implications of it may or may not be of importance to you I would be greatly appreciative of your time and patience if you would time stamp these articles at 1:00 on May, 17, 2004 for me.

If you have any questions please feel free to call me at (813) 514-0659 or on my cell phone at (813) 240-0616. Or you can reach me by e-mail at rca3519@aol.com. I will gladly call and remind you on the 17th if that would be helpful to you.

Thank you for your patience and kindness with this personal matter.

Sincerely,

Rhonda Albanese

Rhonda Albanese

FILED

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Atma Shakti LLC.
(Name of Limited Liability Company)

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

RHONDA CAMPBELL ALBANESE
(Name of Person)

Atma Shakti
(Firm/Company)

3314 HENDERSON Blvd. Suite G
(Address)

Tampa, Fl. 33609
(City/State and Zip Code)

For further information concerning this matter, please call:

Rhonda Campbell Albanese (813) 240-0616
(Name of Person) (Area Code & Daytime Telephone Number)

STREET ADDRESS:
Registration Section
Division of Corporations
409 E. Gaines Street
Tallahassee, Florida 32399

MAILING ADDRESS:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

FILED
01 JUN 11 PM 4:12
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CK # 6873 $100

ARTICLES OF ORGANIZATION
FOR
FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:
The name of the Limited Liability Company is:

Atma Shakti LLC

ARTICLE II - Address:
The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:

3314 Henderson Blvd.
Suite 100 G
Tampa, FL 33609

Mailing Address:

3314 Henderson Blvd
Suite 100 G
Tampa, FL 33609

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:
The name and the Florida street address of the registered agent are:

Rhonda Campbell Albanese
Name

3314 Henderson Blvd., Suite 100 G
Florida street address (P.O. Box **NOT** acceptable)

Tampa FLORIDA 33609
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, Florida Statutes..

Rhonda Campbell Albanese
Registered Agent's Signature

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SEC OF STATE
TALLAHASSEE FLORIDA

ARTICLE IV- Manager(s) or Managing Member(s):
The name and address of each Manager or Managing Member is as follows:

Title: "MGR" = Manager "MGRM" = Managing Member	**Name and Address:**
MGR - OWNER	RHONDA CAMPBELL ALBANESE 3314 HENDERSON BLVD, SUITE 100 G TAMPA, FL 33609

(Use attachment if necessary)

NOTE: An additional article must be added if an effective date is requested.

REQUIRED SIGNATURE:

Rhonda Campbell Albanese
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.)

RHONDA CAMPBELL ALBANESE
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
2011 APR 14 P 4:16
SECRETARY OF STATE
TALLAHASSEE FLORIDA