

# 2006 LIMITED LIABILITY COMPANY REINSTATEMENT

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**DOCUMENT # L04000083103**

1. Entity Name  
**SHRI RADHESHYAM, LLC**



FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
**06 OCT 18 AM 10:05**

Principal Place of Business  
**23700 HWY 27  
LAKE WALES, FL 33859 US**

Mailing Address  
**23700 HWY 27  
LAKE WALES, FL 33859 US**

2. Principal Place of Business  
**1901-1917 DREW STREET**

3. Mailing Address  
**4 TWIN LANE NW**

Suite, Apt. #, etc.



10092006 REIN-LLC CR2E101 (11/05)

City & State  
**CLEARWATER, FL**

City & State  
**WINTER HAVEN**

Zip  
**33765** Country  
**USA**

Zip  
**FL** Country  
**USA**

4. FEI Number  
**20-1888112**

Applied For  
☐ Not Applicable

5. Certificate of Status Desired ☐ **\$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent

**PATEL, RAJNIKANT  
23700 HWY 27  
LAKE WALES, FL 33859**

7. Name and Address of New Registered Agent

Name  
**PATEL RAJNIKANT, S**

Street Address (P.O. Box Number is Not Acceptable)  
**WINTER HAVEN 33881**

City  
**FL** Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE (NOTE: Registered Agent signature required when reinstating) DATE

**FILE NOW!!! FEE IS \$150.00**  
**After January 1, 2007, Fee will be \$200.00**

**Make check payable to  
Florida Department of State**

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR PATEL, RAJNIKANTH 23700 HWY 27 LAKE WALES, FL 33859	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR PATEL, BHARAT 23700 HWY 27 LAKE WALES, FL 33859	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

10. ADDITIONS/CHANGES

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PST PATEL RAJNIKANT, S 4 TWIN LANE NW WINTER HAVEN, FL 33881	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR PATEL BHARAT 4 TWIN LANE NW WINTER HAVEN, FL 33881	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

**SIGNATURE:** **863-229-8030**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #

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RAJNIKANT.S PATEL  
4 TWIN LANE NW  
WINTER HAVEN,FL,33881  
October 17, 2006

October 17, 2006

FLORIDA DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
Ms. Debra S Cooper

**Re: SHRI RADHESHYAM LLC**

Dear Ms. Cooper:

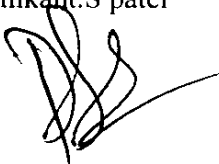
Thank you for renewing our corporation, since I never got this application due to moving from one location to other.

I have written my permanent home address as above where I get all my mails

If you have any questions, give me a call. 863-229-8030

Sincerely,

Rajnikant.S patel

A handwritten signature in black ink, appearing to be 'Rajnikant.S patel', with a long horizontal stroke extending to the right.