

L04000094407

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

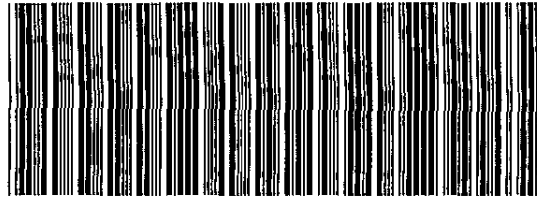
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CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301
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Shandil Hotels, LLC

- ☐ Art of Inc. File
- ☐ LTD Partnership File
- ☐ Foreign Corp. File
- ☒ L.C. File
- ☐ Fictitious Name File
- ☐ Trade/Service Mark
- ☐ Merger File
- ☐ Art. of Amend. File
- ☐ RA Resignation
- ☐ Dissolution / Withdrawal
- ☐ Annual Report / Reinstatement
- ☐ Cert. Copy
- ☒ Photo Copy
- ☐ Certificate of Good Standing
- ☐ Certificate of Status
- ☐ Certificate of Fictitious Name
- ☐ Corp Record Search
- ☐ Officer Search
- ☐ Fictitious Search
- ☐ Fictitious Owner Search
- ☐ Vehicle Search
- ☐ Driving Record
- ☐ UCC 1 or 3 File
- ☐ UCC 11 Search
- ☐ UCC 11 Retrieval

Signature

Requested by:

Name

Date

Time

Walk In

Will Pick Up

EFFECTIVE DATE
1/1/05

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I- Name:

The name of the Limited Liability Company is SHANDIL HOTELS, LLC.

ARTICLE II- Address:

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

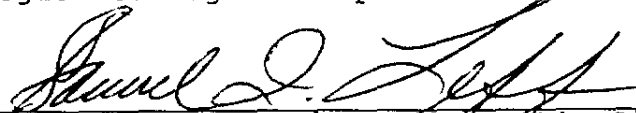
Principal office address: c/o Samuel I. Leff
2775 Sunny Isles Blvd.(N.E. 163rd
Street).
Suite 100

Mailing address: North Miami Beach, Fl., 33160
c/o Samuel I. Leff
2775 Sunny Isles Blvd.(N.E. 163rd
Street).
Suite 100
North Miami Beach, Fl., 33160

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

Samuel I. Leff
2775 Sunny Isles Blvd.(N.E. 163rd Street).
Suite 100
North Miami Beach, Fl., 33160

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 property 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.



SAMUEL I. LEFF, Registered Agent's Signature

Page two.

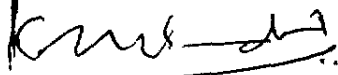
ARTICLE IV-Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

Title:
MGRM

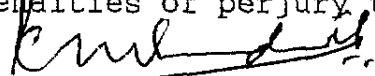
Name and Address:
Virender K. Shandil
c/o Samuel I. Leff
2775 Sunny Isles Blvd.(N.E. 163rd
Street).
Suite 100
North Miami Beach, Fl., 33160

ARTICLE V-Effective date: The effective date is January 1, 2005.



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.)



Virender K. Shandil
Typed or printed name of signee.