105000034450

(Requestor's Name)			
(Address)			
(Address)			
(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
(Business Entity Name)			
, ,			
(Document Number)			
(======================================			
Certified Copies Certificates of Status			
Special Instructions to Filing Officer:			

Office Use Only



100049794481

04/07/05--01025--028 **125.00

2005 APR - 7 PM 1: 25
2005 APR - 7 PM 1: 25
2005 APR - 7 PM 1: 25

TRANSMITTAL LETTER

TO:	Registration Se Division of Cor			
SUBJE	ECT: IMPERIA	L GRANITES LLC (Name of Limited	1 Liability Company)	<u> </u>
The en	closed Articles of	Organization and fee(s) are su	ubmitted for filing.	
Please	return all corresp	ondence concerning this matte	r to the following:	
	NANDAL	AH DHANEKULA	Name of Person)	
		(i	value of reison)	
<u>IMP</u>	ERIAL GRANITI		Firm/Company)	
		·	,	
	1715 E LIN	TON LAKE DRIVE		
			(Address)	E B
				ALC: A
	DELF	RAY BEACH, FL 33445		AL PRIT
		(City/	State and Zip Code)	SSE OU SU
For fur	ther information	concerning this matter, please	call:	PILE 2005 APR -7 PM 1: 25
ı Qı ıuı	ther information	concerning this matter, prease	our.	
NAND	AIAH DHANEK	ULA	at (561) 278-7189	25 25 25 E
	(Name	of Person)	(Area Code & Daytime T	elephone Number)
Enclos	sed is a check fo	or the following amount:		
3 \$125	5.00 Filing Fee	☐ \$130.00 Filing Fee & Certificate of Status	□ \$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
STREET ADDRESS: Registration Section Division of Corporations 409 E. Gaines Street Tallahassee, Florida 32399		MAILING A Registration S Division of C P.O. Box 632 Tallahassee, I	Section Corporations	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

IMPERIAL GRANITES LLC				
ARTICLE II - Address:	•			
The mailing address and street address of	f the principal office of the Limited Liability Company is:			
Principal Office Address:	Mailing Address:			
1715 E LINTON LAKE DRIVE	1715 E LINTON LAKE DRIVE			
DELRAY BEACH, FL 33445	DELRAY BEACH, FL 33445			
9 • • •	istered Office, & Registered Agent's Signatures			
The name and the Florida street address of	of the registered agent are:			
The name and the Florida street address of NANDAIAH DHANEKU	新马·马·马·马·马·马·马·马·马·马·马·马·马·马·马·马·马·马·马·			
	新马·马·马·马·马·马·马·马·马·马·马·马·马·马·马·马·马·马·马·			
	LA Name 25			
NANDAIAH DHANEKU	LA Name 25			
NANDAIAH DHANEKU	Name DRIVE treet address (P.O. Box NOT acceptable)			

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..

Registered Agent's Signature

(CONTINUED)

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

Title: "MGR" = Manager	Name and Address:
"MGRM" = Managing Member	
MGRM	NANDAIAH DHANEKULA
·	1715 E LINTON LAKE DRIVE
	DELRAY BEACH, FL 33445
MGRM	MUNISEKHAR TOKALA
	1595 SPRING HARBOR DRIVE
	DELRAY BEACH, FL 33445
	2005 APR T
(Use attachment if necessary)	SEE TO
NOTE: An additional article must be	added if an effective date is requested 525
REQUIRED SIGNATURE:	DA A

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.)

NANDAIAH DHANEKULA

Typed or printed name of signee

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)