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(F	Requestor's Name)	
4)	Address)	
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(C	City/State/Zip/Phone #)
PICK-UP	☐ WAIT	MAIL
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<u>(</u>	ocument Number)	<u> </u>
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JA SERVICE GUMPANY		
ACCOUNT NO.: 072100000032		
REFERENCE: 732226 9034A		
AUTHORIZATION:		
ACCOUNT NO.: 072100000032 REFERENCE: 732226 9034A AUTHORIZATION: COST LIMIT: \$ PPD		
ORDER DATE: December 1, 2005		
ORDER TIME : 9:35 AM		
ORDER NO. : 732226-005		
CUSTOMER NO: 9034A		
DOMESTIC FILING		
NAME: GOVINDA, LLC		
EFFECTIVE DATE:		
XX ARTICLES OF ORGANIZATION		
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:		
XX PLAIN STAMPED COPY		
CONTACT PERSON: Debbie Skipper - EXT. 2948		
EXAMINER'S INITIALS:		

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - NAME:

The name of the Limited Liability Company is: GOVINDA, LLC



ARTICLE II - ADDRESS:

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

1608 N. US Highway 1 Ormond Beach, FL 32174

ARTICLE III - DURATION:

The period of duration for the Limited Liability Company shall be: PERPETUAL

ARTICLE IV - MANAGEMENT:

The Limited Liability Company is to be managed by the members and the name(s) and addresses(s) of the managing member(s) is/are:

KISHOR PATEL 1608 N. US Highway 1 Ormond Beach, FL 32174

ARTICLE V - Admission of Additional Members:

The right, if given, of the members to admit additional members and the terms and conditions of the admissions shall be:

Members shall have the right to admit additional members at their discretion.

ARTICLE VI - Members Rights to Continue Business:

The right, if given, of the remaining members of the limited liability company to continue the business on the death, retirement, resignation, expulsion, bankruptcy, or dissolution of a member

or the occurrence of any other event which terminates the continued membership of a member in the limited liability company shall be:

The right shall be retained.

signature of member or an additional

representative of a member

(In accordance with section 608.408(3), Florida Statutes, the execution of this affidavit constitutes an affirmation under the penalties of perjury that the facts stated herein are true)

KISHOR PATEL

Typed or printed name of signee

Dated: 11-30-05

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 OR 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA

- 1. The name of the limited liability company is: GOVINDA, LLC
- 2. The name and the Florida street address of the registered agent are:

KISHOR PATEL 1608 N. US Highway 1 Ormond Beach, FL 32174

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.

Print Name: Kishor . Patel