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Certified Copies	_ Certificates	of Status
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COVER LETTER

TO:	Registration Section Division of Corporations			
SUBJ	ECT: Chintamani, L.L.C., (Name of	Limited Liability Compa	any)	
The en	nclosed Articles of Organization and fee(s	(s) are submitted for filing		
Please	return all correspondence concerning thi	is matter to the following	;	
	Garth D. Bonney, Esq.			. 2.
		(Name of Person)	ا الله الله الله الله الله الله الله ال	7
	John L. Gioiello, P.A.		LA REC	FILEU 15
		(Firm/Company)	1 5%	73 [
	404 Jenks Avenue		SEE TO	是一
		(Address)	Q.	
	Panama City, Florida 32	2401	RIO A	5 5 5 S
		(City/State and Zip Code	*)	<u></u>
For fu	rther information concerning this matter,	, please call:		
Gart	h D. Bonney, Esq.	at(850	763-9006 e & Daytime Telephone Number)	
	(Name of Person)	(Area Cod	e & Daytime Telephone Number)	
Enclo	sed is a check for the following amou	unt:		
√] \$12	5.00 Filing Fee \$130.00 Filing I Certificate of Statu		y Certificate of Status &	Ł
	Mailing Address Registration Section Division of Corpora P.O. Box 6327 Tallahassee, FL 323	Registrate ations Division Clifton E 2661 Exc	ourier Address ion Section of Corporations suifding ecutive Center Circle see, FL 32301	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

intelled of Ontal (1221) for Fer	ONDA ENTIED LIABILITY CONTANT
ARTICLE I - Name:	
The name of the Limited Liability Company is:	ALLA SEE
Chintamani, L.L.C.,	
(Must end with the words "Limited Liability Company, "Limited	d Company" or their abbreviation "LLC," or "L.C.,"
	The F.
ARTICLE II - Address:	
The mailing address and street address of the pri	incipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
314 Bainbridge Street	314 Bainbridge Street
Panama City, Florida 32413	Panama City, Florida 32413
The name and the Florida street address of the re Anandkumar J. Shah	egistered agent are:
Name	
314 Bainbridge Street	
Florida street add	ress (P.O. Box NOT acceptable)
Panama City,	FL 32413
City, State, as	nd Zip
liability company at the place designated in the registered agent and agree to act in this capacity statutes relating to the proper and complete per	accept service of process for the above stated limited his certificate, I hereby accept the appointment as a. I further agree to comply with the provisions of all afternance of my duties, and I am familiar with and tered agent as provided for in Chapter 608, F.S

(CONTINUED) Page 1 of 2

Registered Agent's Signature (REQUIRED)

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

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

Title:	Name and Address:
"MGR" = Manager "MGRM" = Managing Member	
MGRM	Anandkumar J. Shah
IVIGITIVI	314 Bainbridge Street
	Panama City, Florida 32413
	r allanta Oity, r torida 02410
MGRM	Birenkumar Shah
	Birenkumar Shah 2985 Smith Street Marlanna, Florida 32446
	Marlanna, Florida 32446
	02/
(Use attachment if necessary)	
	the date of filing: (OPTIONAL)
	t be specific and cannot be more than five business days pric
r 90 days after the date of filing.)	
DECLUDED CICNATUDE.	
REQUIRED SIGNATURE:	,
China !	
Signature of a mon	nber or an authorized representative of a member.

Anandkumar J. Shah

Typed or printed name of signee

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury

Filing Fees:

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

that the facts stated herein are true.)

\$ 5.00 Certificate of Status (Optional)