

Florida Department of State
Division of Corporations
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Resubmit
4/21/06

FLORIDA/FOREIGN LIMITED LIABILITY CO.

SAIKRISHNA LLC

Certificate of Status	1
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April 21, 2006

FLORIDA DEPARTMENT OF STATE
Division of Corporations

HUBCO

SUBJECT: SAIKRISHNA LIMITED LLC
REF: W06000018870

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The name of the entity cannot include "limited." This word/abbreviation is readily associated with or is commonly used to denote another type of entity. Please amend your document throughout accordingly.

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ARTICLES OF ORGANIZATION
FOR
FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name

The name of the Limited Liability Company is: **SAIKRISHNA LLC**

ARTICLE II - Address

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

Principal Office Address:

4125 SE 39th Circle

Ocala, FL 34480

Mailing Address:

4125 SE 39th Circle

Ocala, FL 34480

ARTICLE III - Registered Agent, Registered Office & Registered Agent's Signature

The name and Florida street address of the registered agent are:

Reddy Devarapalli

Name

4125 SE 39th Circle

(P.O. Box or Mail Drop Box **NOT** Acceptable)

Ocala, FL 34480

(City / State / Zip)

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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 - Reddy Devarapalli

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

MGRMJhansirani Devarapalli - 4125 SE 39th Circle, Ocala, FL 34480MGRMAnupama Jasty - 602 Terranova Drive, Winter Haven, FL 33884MGRReddy Devarapalli - 4125 SE 39th Circle, Ocala, FL 34480

(Use attachment if necessary)

REQUIRED SIGNATURE:


 Signature of a member or 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.)

Reddy Devarapalli

Typed or printed name of signer

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