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Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850) 205-0383

From:

Account Name : FAS-T CORP. AGENTS, INC.
Account Number : 071001002335
Phone : (305) 599-0839
Fax Number : (305) 716-0346

FLORIDA/FOREIGN LIMITED LIABILITY CO.**BIS TECHNOLOGIES LLC**

Certificate of Status	0
Certified Copy	1
Page Count	02
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RECEIVED
06 JUL -3 PM 3:00
DIVISION OF CORPORATIONS

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TALLAHASSEE, FLORIDA

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

BIS TECHNOLOGIES LLC

ARTICLE II - Address:

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

Principal Office Address:

Mailing Address:

999 BRICKELL AVE #600

SAME

MIAMI, FL 33131

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

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

ANGELINA GUL

Name

999 BRICKELL AVE #600

Florida street address (P.O. Box **NOT** acceptable)

MIAMI, FLORIDA 33131

City, State, and Zip

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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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.

x 

Registered Agent's Signature

ANGELINA GUL

(CONTINUED)

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

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

<u>Title:</u>	<u>Name and Address:</u>
"MGR" = Manager	
"MGRM" = Managing Member	
<u>MGRM</u>	<u>ANGELINA GUL</u>
	<u>999 BRICKELL AVE #600</u>
	<u>MIAMI, FLORIDA 33131</u>
<u>MEMBER</u>	<u>WAHEED GUL</u>
	<u>999 BRICKELL AVE #600</u>
	<u>MIAMI, FLORIDA 33131</u>
<u>MEMBER</u>	<u>DEARSHAN SHETTY</u>
	<u>999 BRICKELL AVE #600</u>
	<u>MIAMI, FLORIDA 33131</u>

(Use attachment if necessary)

NOTE: An additional article must be added if an effective date is requested.

REQUIRED SIGNATURE:

x Angelina Gul

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.)

Angelina Gul

ANGELINA GUL
Typed or printed name of signee