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

Registration Section

TO:

Divi	ision of Cor	porations				
SUBJECT:	SHASTI E	ENTERPRISES, LLC				
		(Name of Limite	d Liability Com	pany)		
The enclosed	Articles of	Organization and fee(s) are s	ubmitted for fili	nα		
THE CHCIOSCO	i Ai ucies oi	Organization and rec(s) are s	donnacci for fine	ng.		
Please return	all correspo	ondence concerning this matte	er to the following	ıg:		
	Ali Shast	i, M.S., P. E.,				
			Name of Person)	·		
ACCESS ENGINEERING AND CONSULTING, INC.						
		(Firm/Company)			
	110 E. Re	ynolds Street, Suite 804				
			(Address)			
	DI4	Ott. Fladda ooroo				
	Plant	City, Florida 33563				
(City/State and Zip Code)						
For further in	ıformation o	concerning this matter, please	call:			
Ali Shasti, N	1.S., P.E.		at (813	707 - 8336		
	(Name	of Person)		de & Daytime Te	lephone Number)	
Enclosed is	a check fo	r the following amount:				
		•				
J \$125.00 F	iling Fee	☐ \$130.00 Filing Fee &	\$155.00	_	□ \$160.00 Filing Fee,	
		Certificate of Status	Certified Co		Certificate of Status &	
		,	(additional copy	y is enclosed)	Certified Copy (additional copy is enclosed)	
					(maximum oop) is environely	
	erne	ET ADDDECC.		MEATI INVO A	ADDECC.	
STREET ADDRESS: Registration Section				MAILING ADDRESS: Registration Section		
Division of Corporations			Division of Corporations			
409 E. Gaines Street				P.O. Box 6327	, •	
Tallahassee, Florida 32399			Tallahassee, Florida 32314			

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:	
SHASTI ENTERPRISES, LLC	
ARTICLE II - Address: The mailing address and street address of the property o	rincipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
Access Engineering and Consulting, Inc. 110 E. Reynolds Street, Suite 804 Plant City, Florida 33563	
ARTICLE III - Registered Agent, Registered	
The name and the Florida street address of the	registered agent are:
M. Ali Shasti-N	lazem
Name	SSE - #
110 E. Reynolds St	reet, Suite 804
Florida street add	dress (P.O. Box NOT acceptable)
Plant City,	FL 33563
City, State,	and Zip
liability company at the place designated in t registered agent and agree to act in this capacit statutes relating to the proper and complete pe	accept service of process for the above stated limited this certificate, I hereby accept the appointment as y. I further agree to comply with the provisions of all erformance of my duties, and I am familiar with and stered agent as provided for in Chapter 608, F.S

(CONTINUED)

Page 1 of 2

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

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

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:
MGRM	M. Ali Shasti-Nazem
	110 E. Reynolds Street, Suite 804
	Plant City, Florida 33563
Member	Shiva Safavi-Golpayegani
	2713 Kala Lane
	Plant City, Florida 33563
	<u> </u>
	· · · · · · · · · · · · · · · · · · ·
(Use attachment if necessary)	
NOTE: An additional article must be	added if an effective date is requested.
REQUIRED SIGNATURE:	
Signature of a member or	an authorized representative of a member.
	608.408(3), Florida Statutes, the execution s an affirmation under the penalties of perjury n are true.)
M. A	li Shasti-Nazem
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)