

LD0000106141

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

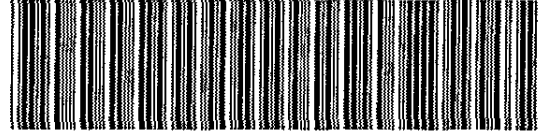
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FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
06 OCT 31 PM 4:40



October 27, 2006

Registration Division
Division of Corporations
Post Office Box 6327
Tallahassee, FL 32314

Re: ZAK EXHIBITIONS (USA) LLC

Dear Sir or Madam:

Enclosed please find the Articles of Organization for the above named entity. I am also requesting a certified copy and a Certificate of Status. Mailing materials have been included. I understand that the fees to file the above entity will be \$160.00 therefore; enclosed in this package you will find a check to cover all costs. I have also included a duplicate set to be mailed as instructed below.

Once filed and certified please return final evidence to me at the below address via US Mail:

SABC
C/O Ryanne Sherman
101 Main Street, Suite One
Tappan, NY 10983

If you should have any questions, or if I can assist in any way, please do not hesitate to call me at 1.888.664.6263 or 845.398.0900.

Thank you,


Ryanne Sherman
Client Services

**ARTICLES OF ORGANIZATION
FOR
FLORIDA LIMITED LIABILITY COMPANY**

ARTICLE I - Name:

The name of the Limited Liability Company is:

ZAK EXHIBITIONS (USA) LLC

ARTICLE II - Address:

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

Principal Office Address:

2860 Somersset Drive #403

Lauderdale Lakes, FL 33311

Mailing Address:

2860 Somerset Drive #403

Lauderdale Lakes, FL 33311

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

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

Sambasivarao Sistla

Name

2860 Somersset Drive #403

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

Lauderdale Lakes

FLORIDA 33311

City, State, and Zip

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, Florida Statutes..

By: S. Sambasivarao

Registered Agent's Signature

Sambasivarao Sistla

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

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

Title:

"MGR" = Manager

"MGRM" = Managing Member

Name and Address:

Managing Member

Syed Zakir Ahmed

No.38 (Old 13) Murrays Gate Road,

CHENNAI - 600 018, India

Managing Member

Sambasivarao Sistla

10336 Lake Tahoe Dr

Fort Wayne, IN 46804

Manager

Tangirala Satyanarayana

A-4 Arundhati Apartments, 95 CPR Road

CHENNAI - 600 018, India

(Use attachment if necessary)

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

REQUIRED SIGNATURE:

S. Sambasivarao

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.)

Sambasivarao Sistla, Authorized Representative

Typed or printed name of signee

Filing Fees:

\$100.00 Filing Fee for Articles of Organization

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)

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