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DIVISION OF CORPORATION

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LAZARUS CORPORATE FILING SERVICE

3320 SW 87TH AVENUE

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MIAMI, FL 33165 (305) 552-5973

Office Use Only CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known): (Corporation Name) (Document #) (Corporation Name) (Document #) (Corporation Name) (Document #) (Corporation Name) (Document #) Certified Copy Walk in Pick up time 2.00 Photocopy Mail out Will wait Certificate of Status **NEW FILINGS AMENDMENTS** -Profit Amendment Resignation of R.A., Officer/Director Not for Profit Limited Liability Change of Registered Agent Domestication Dissolution/Withdrawal Other Merger OTHER FILINGS REGISTRATION/QUALIFICATION Annual Report Foreign ☐ Fictitious Name Limited Partnership Reinstatement Trademark Other

Examiner's Initials

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:	
L & M LTD. Co.	
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:
2000 SOUTH DIXIE HWY SUITE 100M	2000 SOUTH DIXIE HWY SUITE 100M
MIAMI, FL, 33133	MIAMI, FL, 33133
•	
ARTICLE III - Registered Agent, Registered The name and the Florida street address of the re	
MICHEL HUYSMAN, ESQ.	

Name

2000 S. DIXIE HIGHWAY, SUITE 100M

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

MIAMI

FLORIDA 33133

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..

Registered Agent's Signature

Page 1 of 2 (CONTINUED)

SECRETARY OF STATE

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:
William Wallaging Welliot	
MGRM	ANIL JIANDANI
	BAY STREET
	ST. VINCENT
MGR	ESHWAR B SHARMA
	9131 FONTAINEBLEAU BLV APT 4
	MIAMI, FL, 33172
MGRM	SANJAY JIANDANI
	BAY STREET
	ST.VINCENT
MGRM	LACHMAN JIANDANI
	BAY STEET
	ST. VINCENT
(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.

(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.)

ESHWARLAL B SHARMA

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)