Florida Department of State Division of Corporations

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To:

Division of Corporations

Fax Number : (850)205-0383

From:

Account Name : EMPIRE CORPORATE KIT COMPANY

Account Number : 072450003255

: (305)634-3694 Phone : (305)633-9696 Fax Number

FLORIDA/FOREIGN LIMITED LIABILITY CO.

SAGAR HOTELS AND RESORTS, LLC

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Help

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

Article I - Name

The name of the Limited Liability Company is:

SAGAR HOTELS AND RESORTS, LLC

Article II - Address

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

664 Wekiva Road Altzmonte Springs, FL 32714

Article III - Duration

The period of duration for the Limited Liability Company shall be:

Perpetual

Article IV - Management (check and complete the appropriate statement)

- [] The Limited Liability Company is to be managed by a manager or managers and the name(s) and address(es) of such manager(s) is/are:
- [X] The Limited Liability Company is to be managed by the members and the name(s) and address(es) of the managing member(s) is/are:

Ojash N. Jariwala 664 Wekiva Road Altamonte Springs, FL 32714

> This document proposed by: Reighted G. Sephen. Repub 2699 Lee Road, Suite 548 Winter Park, FL 32789 (407) 529-3870 FL. Bar No. 908672

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Article V - Admission of Additional Members

The right, if given, of the remaining members to admit additional members and the terms and conditions of the admissions shall be:

The members of this limited liability company may admit additional members upon a majority vote of all managing members.

Article VI - Members Rights to Continue Business

The right, if given, of the remaining members of the limited liability company to confinue the business on the death, retirement, resignation, expulsion, bankruptcy, or dissolution of a member or the occurrence of any other event which terminates the continued membership of a member in the limited liability company shall be:

The remaining members of the limited liability company shall continue the business upon the death, retirement, resignation, expulsion, bankruptcy, or dissolution of a member or the occurrence of any other event, which terminates the continued membership of a member in the limited liability company.

Print Name: Oiash N. Janiwala

Sworn and Subscribed before me

this 22 day of July

, 2007.

Notary Public

Seal

Jane H. Dilatush
Commission # DD413723
Expires June 24, 2009

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT 401d REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 OR 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

The name of the limited liability company is:

SAGAR HOTELS AND RESORTS, LLC

The name and address of the registered agent and office is:

Ojash N. Jariwala 664 Wekiva Road Altamonte Springs, FL 32714

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 provision of all statutes relating to the property and completed performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

DATE: 1/22/07

Qiash N. Jariwala

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