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(Re	questor's Name)	
(Ad	dress)	
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(Cit	y/State/Zip/Phone	e #)
PICK-ÜP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	Certificates	s of Status
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DIVISION OF CORPORATIONS

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## **COVER LETTER**

TO: Registration Section Division of Corporations	
SUBJECT: 2778 Westmon	reland LLC imited Liability Company)
The enclosed Articles of Organization and fee(s)	are submitted for filing.
Please return all correspondence concerning this	matter to the following:
Parmanand	Singh
·	(Name of Person)
	(Firm/Company)
5926 Sorange	(Firm/Company)  Aux (Address)  32 809 (City/State and Zip Code)
	Ace (Address)
Orlando, Fl	32809 ?: <sup>7</sup> ?
	(City/State and Zip Code)
For further information concerning this matter, pl	lease call:
Daneer Singh (Name of Person)	at ( 407 ) 812 UYOO (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amoun	i:
\$125.00 Filing Fee \$130.00 Filing Fee Certificate of Status	ce & \$\int \\$155.00 \text{ Filing Fee & Certified Copy (additional copy is enclosed)}  \\$160.00 \text{ Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)}
Mailing Address Registration Section Division of Corporation P.O. Box 6327 Tallahassee, FL 32314	Clifton Building

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:	•
2778 Westmorela (Must end with the words "Limited Liability Company, "Limited	
ARTICLE II - Address: The mailing address and street address of the printing address and street address of the printing address.	ncipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
2778 Westmoreland Drs Orlando, Fl 32805	5926 5 Orange Aue Orlando, Fl 32809
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Register business entity with an active Florida registration.)	
The name and the Florida street address of the re	
Parmanand Name	Singh Property of the state of
5926 Sorange Florida street add	P SKITT OF THE STATE OF THE STA
Orlando City, State, al	

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..

Registered Agent's Signature (REQUIRED)

(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> </u>	Name and Address:
MGR" = Manager	
MGRM" = Managing Member	• •
MGR	Parmanand Singh
	5926 5 Orange Ave
	or1, F132809
MGR.	Davieca Sinah
	5926 S Orange Ave
	Orl , F1 32809
	0, 2,
	<b>A</b>
Use attachment if necessary)	2: 3
EV: Effective date, if other than th	ne date of filing: (OPTION
fective date is listed, the date must	be specific and cannot be more than five business da
days after the date of filing.)	
REQUIRED SIGNATURE:	
<del></del>	1 -
0	
- Muni	have an anathonized representative of a mambar
Signature of a mem	ber or an authorized representative of a member.

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)

that the facts stated herein are true.)

Parmanand Singh
Typed or printed name of signee