

L08000047590

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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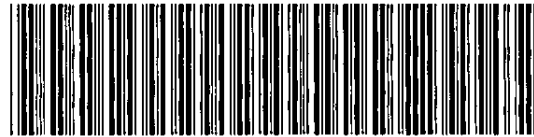
(Business Entity Name)

(Document Number)

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RECEIVED  
08 MAY 13 AM 10:37  
DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

FILED  
08 MAY 13 PM 1:35  
DEPARTMENT OF STATE  
TALLAHASSEE, FLORIDA

EFFECTIVE DATE

5/12/08

B. KOHR

MAY 13 2008

EXAMINER



CORPORATION SERVICE COMPANY™

ACCOUNT NO. : 072100000032

REFERENCE : 568210 7266213

AUTHORIZATION :

*[Signature]*

COST LIMIT : \$ 125.00

ORDER DATE : May 13, 2008

ORDER TIME : 9:39 AM

ORDER NO. : 568210-005

CUSTOMER NO: 7266213

EFFECTIVE DATE

5/12/08

FILED  
08 MAY 13 PM 1:35  
TALLAHASSEE, FLORIDA

DOMESTIC FILING

NAME: SIDHU ADVISORS FDT, LLC

EFFECTIVE DATE:

XX ARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX PLAIN STAMPED COPY

CONTACT PERSON: Heather Chapman - EXT. 2908

EXAMINER'S INITIALS: \_\_\_\_\_

EFFECTIVE DATE 5/12/08

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

**ARTICLE I - Name:**

The name of the Limited Liability Company is:

Sidhu Advisors PDT, LLC

(Must end with the words "Limited Liability Company," "Limited Company" or their abbreviation "LLC," or "L.C.,")

**ARTICLE II - Address:**

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

**Principal Office Address:**

511 Granada Drive

Palm Coast, Florida 32164

**Mailing Address:**

511 Granda Drive

Palm Coast, Florida 32164

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

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

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

Corporation Service Company

Name

1201 Hays Street

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

Tallahassee

FL 32301

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, F.S..*

Corporation Service Company

By: Heather Chapman

Registered Agent's Signature (REQUIRED)

**Heather Chapman  
as its agent**

(CONTINUED)

Page 1 of 2

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**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:**

MGRM

Jay S. Sidhu

511 Granada Drive

Palm Coast, Florida 32164

(Use attachment if necessary)

**ARTICLE V:** Effective date, if other than the date of filing: 5/12/08 (OPTIONAL)  
(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

**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.)

By

Jay S. Sidhu  
Typed or printed name of signer

**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)