

L08000058811

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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(Business Entity Name)

(Document Number)

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W08-27805
J. BRYAN JUN - 6 2008

J. BRYAN

JUN 16 2008

EXAMINER

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
08 JUN 13 PM 4:11



FLORIDA DEPARTMENT OF STATE
Division of Corporations

June 6, 2008

SUBHASHINI RANGAM
5650 N.W. 42 WAY
COCONUT CREEK, FL 33073

SUBJECT: SUBKRISHNA LLC
Ref. Number: W08000027805

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DIVISION OF CORPORATIONS
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We have received your document for SUBKRISHNA LLC and your check(s) totaling \$155.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Pursuant to section 608.409(2), F.S., the effective date must be specific, cannot be more than five business days prior to the date of filing or more than 90 days after the date of filing. Our office received your document on June 5, 2008. Please amend your document accordingly.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6043.

Joey Bryan
Regulatory Specialist II

Letter Number: 308A00035269

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

SUBKRISHNA LLC.

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

ARTICLE II - Address:

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

Principal Office Address:

5650 N.W. 42 WAY

COCONUT CREEK

FL 33073

Mailing Address:

5650 N.W. 42 WAY

COCONUT CREEK

FL 33073

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:

SUBHASHINI RANGAM

Name

5650 N.W. 42 WAY

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

COCONUT CREEK, FLORIDA - 33073

City, State, and Zip

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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..

Subhashini Rangam
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:

Title:

"MGR" = Manager

"MGRM" = Managing Member

Name and Address:

MGRM

SUBHASHINI RANGAM

5650 NW 42nd WAY

COCONUT CREEK , FL 33073

MGRM

KRISHNA RAO RANGAM

5650 NW 42nd WAY

COCONUT CREEK , FL 33073

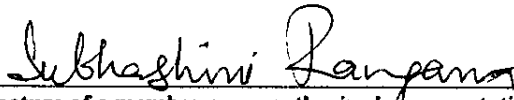
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(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: _____ (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.)

SUBHASHINI RANGAM

Typed or printed name of signee

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)