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SECRETARY OF STATE
TAN A MASSEE, FLORID

D. BRUCE

FEB 23 2009

**EXAMINER** 

## **COVER LETTER**

TO:	Registration So Division of Cor							
SUBJE	SMIM I	NVESTMENTS LL	С					
SUBJE	c:	(Name of Limited		any)				
The en	closed Articles of	Organization and fee(s) are sub	omitted for filin	g.				
Please	return all correspo	ondence concerning this matter	to the following	g:				
	SOOKDEC	MAHARAJ						
		(Na	ame of Person)				_	
				<del> </del>			<u> </u>	
		(Fi	irm/Company)					
	3602 NW 8	B2ND AVE					_	
			(Address)			<b>5</b>	_	
	CORAL SE	PRINGS, FL 33065-	-4518			SECK	09 F	
		(City/S	tate and Zip Cod	e)		HAS	EB 20	*****
For fur	ther information c	oncerning this matter, please ca	ıll:					
HAR	RRY MAHA	RAJ a	, 954	, 520-885	3 5	STAT	PM 4: 4	
	(Name o	of Person)	(Area Coo	le & Daytime Tele	phone Number)	Jmi o >	<b>O</b>	
Enclos	sed is a check for	the following amount:						
<b>✓</b> \$125.	00 Filing Fee [	\$130.00 Filing Fee & Certificate of Status	\$155.00 Filin Certified Co (additional cop	ру	\$160.00 Filing Certificate of Certified Cop (additional copy	Status & y		
		Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Registrat Division Clifton E 2661 Ex	ourier Address ion Section of Corporations Building ecutive Center C see, FL 32301				

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

Φ;	
The name of the Limited Liability Company is:	
(material manuscript Diffined Diability Company, 2.2.C., or 25C.)	
ARTICLE II - Address:	
The mailing address and street address of the principal office of the Limited Lia	ability Company is:
Principal Office Address: Mailing Address:	
3602 NW 82ND AVE	
CORAL SPRINGS, FL 33065	
(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individ	
The name and the Florida street address of the registered agent are:	B 20
HARRY MAHARAJ	
Name	
3602 NW 82ND AVE	U 4: 40 STATE CORNED
Florida street address (P.O. Box NOT acceptable)	Ā.,, )
CORAL SPRINGS FL 33065-4518	

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..

City, State, and Zip

(CONTINUED)

Page 1 of 2

Agent's Signature (REQUIRED)

## ARTICLE IV- Manager(s) or Managing Member(s): The name and address of each Manager or Managing Member is as follows:

Title:		Name and Address:		
"MGR" = Mar $"MGRM" = M$	nager Ianaging Member			
MGR		SOOKDEO MAHARAJ		
		3602 NW 82ND AVE		
		CORAL SPRINGS, FL 33065-4518		
		<del> </del>	<u> </u>	
	<del></del>			
(Use attachme	nt if necessary)			
	•			
		date of filing: e specific and cannot be more than five b		
0 days after the		specific and cannot be more than five b	usiness au	ys prio
REQUIRED S	SIGNATURE:		Ħ.;	~
		7	[] []	09 F
	O Sook	es eller		
	Signature of a member	r or an authorized representative of a member	AR) SSI	2
	(In accordance with sec of this document consti that the facts stated h	etion 608.408(3), Florida Statutes, the execution tutes an affirmation under the penalties of perjury erein are true.)	, FO	
	T.,	ped or printed name of signee	A C	>

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)