# L09000055800

(Requestor's Name)			
(Address)			
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PICK-UP WAIT MAIL			
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99 JUN -8 FN 3: 4

S. HAWKES

JUN 9 - 2009

**EXAMINER** 

# **COVER LETTER**

	of Corporations		
SUBJECT:	Dynamic Accountii	ng & Bookkeeping Services, LLC	
	Name of Limi	ted Liability Company	
The enclosed Art	icles of Organization and fee(s) are	submitted for filing.	
Please return all o	correspondence concerning this man	tter to the following:	
<del></del>	Sat	twattie Lakhnath	
		Name of Person	
	Dynamic Accounting	ng & Bookkeeping Services, LLC	
		Firm/Company	
	5	511 SW 8th St	
		Address	
	Plar	ntation, FL 33317	
	Ci	ty/State and Zip Code	
<del></del>	s.lakt	nnath@comcast.net for future annual report notification)	
For further inform	nation concerning this matter, pleas	•	
Sa	atwattie Lakhnath	at ( 954 ) 583-0286	
	Name of Person	Area Code & Daytime Telephone Number	
Enclosed is a ch	eck for the following amount:		
<b>₹</b> 125.00 Filing	Fee \$\int_\$130.00 Filing Fee & Certificate of Status	Certified Copy (additional copy is enclosed)  \$160.00 Filing Fee, Certificate of Status Certified Copy (additional copy is enclosed)	s &
	Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street/Courier Address Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	

### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:	
Dynamic Accounting & Bookk (Must end with the words "Limited Liability	
ARTICLE II - Address: The mailing address and street address of the print	ncipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
5511 SW 8th St Plantation, FL 33317	5511 SW 8th St
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Register business entity with an active Florida registration.)	Office, & Registered Agent's Signature: red Agent. You must designate an individual or another
The name and the Florida street address of the re-	gistered agent are:
Satwattie La	khnath
Name	
5511 SW 8	Sth St
Florida street address (P.O. E	Box NOT acceptable)
Plantation, FL 33317	FL.
City, State, and	1 Zip
	scept service of process for the above stated limited is certificate. I hereby accept the appointment as

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)

# 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>Title:</u> "MGR" = Manag "MGRM" = Man		
MGR	Satwattie Lakhnath 5511 SW 8th St	
<del>- ,                                   </del>	Plantation, FL 33317	S COUNTY
		**************************************
(Use attachment i	late, if other than the date of filing: (OPTIONAL)	
o or 90 days after the da		r
<u>REQUIRED</u> SIG	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.)	
Filing Fees:	Satwattie Lakhnath Typed or printed name of signee	

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)