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JUL 30 2009

**EXAMINER** 

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2009 JUL 29 PH 1:49
SECRETARY OF STATE,
TALLAHASSEE, FI OBJE,

TO: Department of State

FROM: Jugal K Taneja

RE: Division of Corporations - NETPAYING SOLUTIONS

Please notify me ASAP that you received and that you will provide me my registration number. I can be reached at itaneja@aol.com. Office number 727-471-0856 and my assistant is Susan Sweat at 727-471-0850, email: susans@onlineihp.com

Thank you!

Jugal K Taneja

# **COVER LETTER**

TO: Registration Division of C	n Section Corporations		
SUBJECT:	NETPAYII	NG SOLUTIONS, LLC	
	··	ed Liability Company	
The enclosed Articles	of Organization and fee(s) are s	submitted for filing.	
Please return all corre	spondence concerning this matte	er to the following:	
	JUG	GAL K TANEJA	
		Name of Person	
	NET	FPAYING, INC.	2009 JUL 29 PM 1: 49 SECRETARY OF STATE TALLAHASSEE, FLORIO
		Firm/Company	AR JE
	6911 B	RYAN DAIRY RD	JARN ASSE
		Address	E OF
	LAD	CO EL 22777	N I: L F STAT FLOR
		GO, FL 33777 //State and Zip Code	
	•	•	A
	E-mail address: (to be used for	neja@aol.com or future annual report notification)	
For further information	on concerning this matter, please	call:	
JUG	AL K TANEJA		80-9500
Nan	te of Person	Area Code & Daytime Tele	phone Number
Enclosed is a check	for the following amount:		
]\$125.00 Filing Fee	Security of Status Certificate of Status	S155.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	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 C Tallahassee, FL 32301	

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

The name of the Limited Liability Comp	pany is:	
NETPAYING	SOLUTIONS, LLC	
(Must end with the words "Limi	ted Liability Company," "L.L.C.," or "LLC.")	
ARTICLE II - Address:		
The mailing address and street address o	f the principal office of the Limited Liab	bility Company is:
Principal Office Address:	Mailing Address:	2009 . SEC: TALL
6911 BRYAN DAIRY RD LARGO, FL 33777	6911 BRYAN DAIRY RD LARGO, FL 33777	FILEL 2009 JUL 29 PH I SECRETARY OF ST TALLAHASSEEL FL
ARTICLE III - Registered Agent, Reg	gistered Office, & Registered Agent's S	Signature —
(The Limited Liability Company cannot serve as its o business entity with an active Florida registration.)	wn Registered Agent. You must designate an individu	<b>9</b>
(The Limited Liability Company cannot serve as its o		0.00 m
(The Limited Liability Company cannot serve as its o business entity with an active Florida registration.)  The name and the Florida street address		0. <b>9</b>
(The Limited Liability Company cannot serve as its o business entity with an active Florida registration.)  The name and the Florida street address	of the registered agent are:	<b>9</b>
(The Limited Liability Company cannot serve as its o business entity with an active Florida registration.)  The name and the Florida street address  JUG	of the registered agent are:	9
(The Limited Liability Company cannot serve as its o business entity with an active Florida registration.)  The name and the Florida street address  JUG  6911 B	of the registered agent are:  SAL K TANEJA  Name	<b>9</b>
(The Limited Liability Company cannot serve as its o business entity with an active Florida registration.)  The name and the Florida street address  JUG  6911 B	of the registered agent are:  SAL K TANEJA  Name  RYAN DAIRY RD  ess (P.O. Box NOT acceptable)	<b>9</b>

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:

	Name and Address:
"MGR" = Manager "MGRM" = Managing	g Member
MGR	JUGAL K TANEJA
	6911 BRYAN DAIRY RD
	LARGO, FL 33777
MGRM	JUGAL K TANEJA
	6911 BRYAN DAIRY RD
	LARGO, FL 33777 ♣ 🛱
	ASS ASS
	TE TE
Use attachment if ned	ressary)
LE V: Effective date, fective date, the date is listed, the days after the date of	if other than the date of filing: (OPTION he date must be specific and cannot be more than five business datiling.)
LE V: Effective date, fective date, the date is listed, the days after the date of	if other than the date of filing: (OPTION he date must be specific and cannot be more than five business datiling.)
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fective date is listed, t days after the date of REQUIRED SIGNA' Sign: (In a	for other than the date of filing:
LE V: Effective date, fective date is listed, the days after the date of REQUIRED SIGNATION Signature of the date	for other than the date of filing:

of Registered Agent
S 30.00 Certified Copy (Optional)

- S 5.00 Certificate of Status (Optional)