## Florida Department of State

Division of Corporations Public Access System

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H090001887543)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name

: A.A.ALJ, CPA

Account Number : T20000000192

Phone

: (407)298-3900

Fax Number

: (407)298-0660

# FLORIDA/FOREIGN LIMITED LIABILITY

#### SHAWN HOLDING LLC

Certificate of Status	1
Certified Copy	. 0
Page Count	03
Estimated Charge	\$130.00

EXAMINER

egranic Filing Menu

Corporate Filing Menu

Help

(((H09000188754 3)))

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

#### ARTICLE 1 - Name:

The name of the Limited Liability Company is: SHAWN HOLDING, LLC.

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

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Comp

2838 GRAPEVINE CREST

**OCOEE, FL 34761** 

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:

#### ARIF KHAN

#### 2838 GRAPEVINE CREST

**OCOEE, FL 34761** 

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.

ARIF KHAN / Registered Agent's Signature

(((H09000188754 3)))

### ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

"MGR" - Manager
"MGRM" - Managing Member

AIUF KHAN, MGRM 2838 GRAPEVINE CREST OCOEE, FL 34761

PHULMATTIE MOHABIR, MGRM 2838 GRAPEVINE CREST OCOEE, FL 34761 SECRETARY OF STATE

ARTICLE V: Effective date, if other than the date of filing: AUGUST 25, 2009 (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.)

PHULMATTIE MOHABIR

Typed or printed name of signee