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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: KHARAG STABLES, LLC
(Name of Limited Liability Company)

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

TOM MORSON

(Name of Person)

- SAME -

(Firm/Company)

4300 N. W. 23RD AVE, SUITE 100

(Address)

GAINSVILLE FL 32606

(City/State and Zip Code)

2010 APR 26 PM 4:15
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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For further information concerning this matter, please call:

MARC ROBINSON

(Name of Person)

at (352) 299-5895

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- ☐ \$125.00 Filing Fee ☐ \$130.00 Filing Fee & Certificate of Status ☐ \$155.00 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 Circle
Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR A FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1: NAME:

THE NAME OF THE LIMITED LIABILITY COMPANY IS:

KHARAG STABLES, LLC.

ARTICLE 11-ADDRESS:

THE MAILING AND STREET ADDRESS FOR THE PRINCIPAL OFFICE OF
THE LIMITED LIABILITY COMPANY IS:

19923 EUNTON AVE.
HOLLISWOOD, N.Y. ZIP 11423

ARTICLE 111 REGISTERED AGENT, OFFICE AND REGISTERED AGENT SIGNATURE:

TOM MORSON

NAME

4300 N. W. 23rd. AVE. SUITE 477

GAINSVILLE, FLORIDA, 32606

FILED
2010 MAR 26 PM 1:15
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE
OF PROCESS FOR KHARAG STABLES, LLC, 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 SIGNATURE

TOM MORSON

ARTICLE 1V. MANAGER:

"MGR" MANAGER

BEJAI RAMNARAYAN
19923 EUNTON AVE
HOLLISWOOD N.Y. 11423

ARTICLE V: THE EFFECTIVE DATE WILL BE THE DATE OF FILING.

IN ACCORDANCE WITH SECTION 608.408(3), F.S.
UNDER THE PENALTIES OF PERJURY, THE FACTS
STATED HERIN ARE TRUE.


BEJAI RAMNARAYAN

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TALLAHASSEE, FLORIDA

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