

L10000118372

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



700181592137

06/09/10--01032--004 **130.00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2010 NOV 12 AM 9:48

FILED

T. CLINE

NOV 15 2010

EXAMINER



FLORIDA DEPARTMENT OF STATE
Division of Corporations

June 10, 2010

KHALIL PAKIDEH
1250 HOLLYWOOD DR
MONROE, MI 48162

SUBJECT: MARJAN HOTELS, LLC
Ref. Number: W10000027887

We have received your document for MARJAN HOTELS, LLC and your check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6020.

Tammi Cline
Regulatory Specialist II

Letter Number: 710A00014388

2010 NOV 12 AM 9:48
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Marjan Hotels

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:

Khalil Pakideh

Name of Person

Firm/Company

1250 Hollywood Dr

Address

Monroe, Michigan 48162

City/State and Zip Code

pakideh@hotmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Santhosh Pillai

Name of Person

at (248)

2032128

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

2008 NOV 12 AM 9:48
TALLAHASSEE, FLORIDA
DIVISION OF STATE
CORPORATIONS

FILED

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Marjan Hotels, LLC

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

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:

Mailing Address:

1280 Hollywood Dr

Monroe, MI 48161

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:

Houman Etemadi

Name

150 Australian Ave

Florida street address (P.O. Box **NOT** acceptable)

West Palm Beach

FL 33408

City, State, and Zip

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.

H. Etemadi
Registered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

2010 NOV 12 AM 9:48
STATE OF FLORIDA
TALLAHASSEE, FLORIDA

FILED

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

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

Title:

"MGR" = Manager

"MGRM" = Managing Member

Name and Address:

MGR

Khalil Pakideh

1250 Hollywood Dr

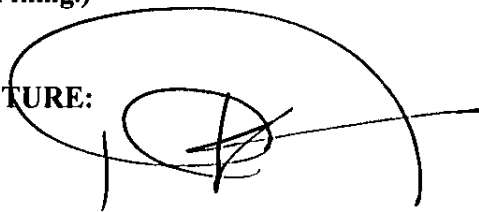
Monroe, MI 48161

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: _____ (OPTIONAL)

(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.)

KHALIL PAKIDEH

Typed or printed name of signee

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)

2019 NOV 12 AM 9:48
FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA