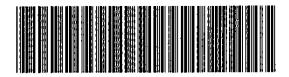
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B. BOSTICK
'AUG 5 2011
EXAMINER

COVER LETTER

TO:

Registration Section

Division of Corporations The Knanaya Enhancement Enterprise Services of Florida, 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: **Tomy Thomas** Name of Person Firm/Company 2801 Bent Leaf Drive Address Valrico, FL 33594 City/State and Zip Code tomylissy@hotmail.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Tomy Thomas Name of Person Area Code & Daytime Telephone Number Enclosed is a check for the following amount: \$155.00 Filing Fee & \$160.00 Filing Fee, 25.00 Filing Fee \$130.00 Filing Fee & Certificate of Status & Certificate of Status Certified Copy Certified Copy (additional copy is enclosed) (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 FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:	
The Knanaya Enhancement Enterp	
(Must end with the words "Limited Liabil	ity Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the pr	rincipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
2801 Bent Leaf Drive	2801 Bent Leaf Drive
Valrico, FL 33594	Valrico, FL 33594
business entity with an active Florida registration.) The name and the Florida street address of the r Tomy Thomas Name 2801 Bent Leaf D	
<u> </u>	dress (P.O. Box NOT acceptable)
Valrico	_{FL} 33594
City, St.	ate, and Zip
liability company at the place designated in t registered agent and agree to act in this capacit statutes relating to the proper and complete pe	accept service of process for the above stated limited this certificate, I hereby accept the appointment as y. I further agree to comply with the provisions of all erformance of my duties, and I am familiar with and stered agent as provided for in Chapter 608, F.S

(CONTINUED)

Registered Agent's Signature (REQUIRED)

ARTICLE IV- Manager(s) or Managing Member(s): The name and address of each Manager or Managing Member is as follows: Title: Name and Address: "MGR" = Manager "MGRM" = Managing Member MGRM Chacko K. Poovathumkal 7303 Colonial Lake Drive Riverview, FL 33578 MGRM Joseph Korattiyil 5428 Main Street Skokie, IL 60077 Alex Kandarappallil MGRM 1824 Laurel Oak Drive Valrico, FL 33596 **MGRM** Matthew M. Korattiyil 1601 Palace Court Vairico, FL 33594 (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.

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)

constitutes a third degree felony as provided for in s.817.155, F.S.)

I am aware that any false information submitted in a document to the Department of State

Typed or printed name of signee

TOMY THOMAS

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:	
MGRM	Dominic M. Korattlyil	
	309 Golden Elm Drive	
	Seffner, FL 33584	
MGRM	Lucy Thomas	
	2208 Clubhouse Drive	
	Plant City, FL 33566	7
MGRM	Anitha Alsanbana Joseph	
	4106 Imperial Eagle Drive	
	Valrico, FL 33594	(3) F
		The The
MGRM	Tomy Thomas	<u> </u>
	2801 Bent Leaf Drive	- <u>9</u>
	Valrico, FL 33594	<u> </u>
(Use attachment if necessary) LE V: Effective date, if other than the ffective date is listed, the date must days after the date of filing.)	e date of filing:	(OPTIONAL ve business days
REQUIRED SIGNATURE:		
	James 1	
Signature of a mem	per or an authorized representative of a men	nber.
constitutes an affirmation und	08.408(3), Florida Statutes, the execution of thi ler the penalties of perjury that the facts stated I rmation submitted in a document to the Depart	herein are true.

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)

TOMY THOMAS
Typed or printed name of signee

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

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

<u>Title:</u>	Name and Address:	
"MGR" = Manager		
"MGRM" = Managing Membe	er e e e e e e e e e e e e e e e e e e	
MGRM	Martin M. Korattiyil	
	2204 Countryclub Drive	
	Plant City, FL 33566	
MGRM	Anii K. Joseph	TAI
	2316 Travis Robert Avenue	
	Valrico, FL 33594	E
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(Use attachment if necessary)		
LE V: Effective date, if other t	han the date of filing: must be specific and cannot be more than	(OPTION five business da
LE V: Effective date, if other t fective date is listed, the date days after the date of filing.)	han the date of filing:	
LE V: Effective date, if other to ffective date is listed, the date days after the date of filing.) REQUIRED SIGNATURE:	must be specific and cannot be more than	five business da
LE V: Effective date, if other to ffective date is listed, the date of days after the date of filing.) REQUIRED SIGNATURE: Signature of a (In accordance with seconstitutes an affirmation of a new are that any fall arm aware that any fall of the control of the constitutes are affirmation of the	must be specific and cannot be more than	nember. this document and herein are true.
CLE V: Effective date, if other to ffective date is listed, the date of days after the date of filing.) REQUIRED SIGNATURE: Signature of a (In accordance with seconstitutes an affirmation is a management of the date of the days after the date of silvers.)	must be specific and cannot be more than Tomal	nember. this document and herein are true.

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent \$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)