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EXAMINER

COYER LETTER

TO:

Registration Section

Division of Corporations

SAIRAM L.L.C. ·SUBJECT: _ 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: Rajiv Sharma Name of Person SAI RAM L.L.C. Firm/Company 14 Sanford Ave. Address Debary, FL 32713 City/State and Zip Code Reggie6767@yahoo.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Rajiv Sharma Name of Person Area Code & Daytime Telephone Number Enclosed is a check for the following amount: **X**\$125.00 Filing Fee \$130.00 Filing Fee & \$155.00 Filing Fee & \$160.00 Filing Fee, Certificate of Status & Certificate of Status Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed) **Mailing Address** Street/Courier Address Registration Section Registration Section **Division of Corporations** Division of Corporations Clifton Building P.O. Box 6327 2661 Executive Center Circle Tallahassee, FL 32314

Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE Division of Corporations

July 18, 2011

RAJIV SHARMA / SAI RAM L.L.C. 14 SANFORD AVE. DEBARY, FL 32713

SUBJECT: SAI RAM L.L.C. Ref. Number: W11000037577

We have received your document for SAI RAM L.L.C. and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity. Section 608.406, Florida Statutes, was amended effective July 1, 2007, to require the name of a limited liability company to be distinguishable from the names of all other filings filed with the Division of Corporations, except for fictitious name registrations and general partnership registrations.

Please select a new name and make the correction in all the appropriate places. One or more words may be added to make the name distinguishable from the one presently on file. Adding of Florida or Florida to the end of the name is not acceptable. A search for name availability can be made on the Internet through the Division's records at www.sunbiz.org.

Please note the name of a limited liability company must end with the words Limited Liability Company, the abbreviation L.L.C., or the designation LLC. The word Limited may be abbreviated as Ltd. and the word Company may be abbreviated as Co. The following suffixes are no longer acceptable: Limited Company, L.C., and LC.

Please return the corrected original and one copy of 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) 245-6047.

Carolyn Lewis
Regulatory Specialist II
Registration/Qualification Section

Letter Number: 811A00016913

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limite	d Liability Company	y is:				
		SAI		LC.		
(Must end	d with the words "Limited I	Liability Compa	ny, "L.L.C.," or "LLC.	")		
ARTICLE II - Address The mailing address an		e principal (office of the Limi	ted Liability Co	ompany	/ is:
Principal Office Addr	ess:	<u>Maili</u>	ng Address:			
14 Sanford Debary, F			anford Ave. ary, FL 32713			
ARTICLE III - Regist (The Limited Liability Compar business entity with an active	ny cannot serve as its own I					
The name and the Flori	da street address of t	the registere	d agent are:	SEC	2011 AUG	
	Rajiv Shai	rma		A RE	E	نز! سب
	•	ame		ASS ASS	ر ان	<u>[</u>
	14 Sanford Ave	e.				Ti a
	Florida stree	et address (P.O	. Box <u>NOT</u> acceptal	FLORIDA	₽2:	(
	Debary,	FL	32713)RE	32 32	
	Cit	y, State, and Z	ip	Þ	,	

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..

egistered 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:		1 1 1 - 1 - 1
<u>Title:</u> "MGR" = Manager	Name and Address:	2011 AUG -5 RM 26 SECRETARY OF STA TALLAHASSEE. FLOR
"MGRM" = Managing Member		TALLAHASSEE, FLOR
MGRM	Rajiv Sharma 14 SanFard Aue Debary, FL 32713	
(Use attachment if necessary)		
effective date is listed, the date must be days after the date of filing.)	e date of filing:be specific and cannot be more than five	business days prior
REQUIRED SIGNATURE:		
Ry		
(In accordance with section 60 constitutes an affirmation und I am aware that any false info	Der or an authorized representative of a member 08.408(3), Florida Statutes, the execution of this doer the penalties of perjury that the facts stated here remation submitted in a document to the Department of the penalties of perjury as provided for in s.817.155, F.S.)	ocument ein are true.
RA	JW SHARMA yped 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)