

LI 006 128757

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

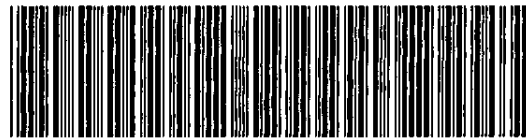
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

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T. CLINE

NOV 21 2011

EXAMINER

LI-128757

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: KAPADIA LLC
Name of Limited Liability Company

Dear Sir or Madam:

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

Please return all correspondence concerning this matter to the following:

SEEMA JAIN
Name of Person

YOUR BIZ CONSULTANTS
Firm/Company

P.O. BOX 48914
Address

Tampa, FL 33646
City/State and Zip Code

Jain@yourbizconsultants.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

SEEMA JAIN at (813) 395-0089
Name of Person Area Code & Daytime Telephone Number

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

Enclosed is a check for the following amount:

- \$25 Filing Fee
- \$30 Filing Fee & Certificate of Status
- \$55 Filing Fee & Certified Copy
- \$60 Filing Fee, Certificate of Status & Certified Copy

2011 NOV 18 AM 11:14
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA
 FILED

**ARTICLES OF CORRECTION
FOR
FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY**

Pursuant to section 608.4115, F.S., this document is being submitted **within the required 30 business days** to correct the **attached** articles of organization or application to transact business in Florida.

FIRST: The name of the limited liability company is:

KAPADIA LLC

SECOND: The articles of organization or the application to transact business

(CHECK THE APPROPRIATE BOX AND COMPLETE THE APPLICABLE STATEMENT)

Contains an incorrect statement. The incorrect statement, the reason the statement is incorrect, and the corrected statement are as follows:

ADDITIONAL MGR

LAKSHMI KAPADIA

5331 VILLAGEBROOK DRIVE

WESLEY CHAPEL, FL 33544

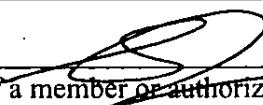
OR

Was defectively signed. The manner in which the document was defectively signed and the appropriate correction are as follows:

2011 NOV 18 PM 1:15
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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Dated: NOVEMBER 14, 2011



Signature of a member or authorized representative of a member

Srema Jain

Typed or printed name of signee

Filing Fee: \$25.00
Certified Copy: \$30.00 (optional)

**Electronic Articles of Organization
For
Florida Limited Liability Company**

L11000128757
FILED 8:00 AM
November 14, 2011
Sec. Of State
dbruce

Article I

The name of the Limited Liability Company is:

KAPADIA LLC

Article II

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

5331 VILLAGEBROOK DRIVE
WESLEY CHAPEL, FL. US 33544

The mailing address of the Limited Liability Company is:

PO BOX 46652
TAMPA, FL. US 33646

Article III

The purpose for which this Limited Liability Company is organized is:

ANY AND ALL LAWFUL BUSINESS.

Article IV

The name and Florida street address of the registered agent is:

YOUR BIZ CONSULTANTS
8875 HIDDEN RIVER PKWY, SU 300
TAMPA, FL. 33637

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.

Registered Agent Signature: SEEMA JAIN

Article V

The name and address of managing members/managers are:

Title: MGR
POORAB KAPADIA
PO BOX 46642
TAMPA, FL. 33646 US

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FILED 8:00 AM
November 14, 2011
Sec. Of State
dbruce

Article VI

The effective date for this Limited Liability Company shall be:

11/11/2011

Signature of member or an authorized representative of a member

Electronic Signature: POORAB KAPADIA

I am the member or authorized representative submitting these Articles of Organization and affirm that the facts stated herein are true. I am aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S. I understand the requirement to file an annual report between January 1st and May 1st in the calendar year following formation of the LLC and every year thereafter to maintain "active" status.