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(Re	equestor's Name)	<u>.</u>
(Ad	dress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	= #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

Office Use Only



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Effective Date /-/0-12

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J. SAULSBERRY EXAMINER JAN 17 2012

COVER LETTER

TO:

Registration Section

Division of Corporations	
SUBJECT: Cellular Xtra LLC.	
5050511	nited Liability Company
The enclosed Articles of Organization and fee(s) are	are submitted for filing.
Please return all correspondence concerning this matt	
Darm Datal	
Dean Patel	Name of Person
Cellular Xtra LLC	
Celidiai Atia LEC	Firm/Company
2560 NIM 72nd Avenue	
3560 NW 72nd Avenue	Address
	TA: 20
Miami, FI 33122	City/State and Zip Code
xpresstrading02@aol.com	City/State and Zip Code City/State and Zip Code ARE
For further information concerning this matter, please	ease call: 20 F STATE 21 (786) 303-2497
Dean Patel	706 202 2407 "DATE OF TAKE
Name of Person	at (786) 303-2497
	•
Enclosed is a check for the following amount:	
\$125.00 Filing Fee \$\times \text{S130.00 Filing Fee & Certificate of Status}	\$155.00 Filing Fee & \$160.00 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 FLORIDA LIMITED LIABILITY COMPANY

	ust end with the words "Limi	ited Liability Company, "L.L.C.," or "LLC.")	**************************************
ARTICLE II - Ac		of the principal office of the Limited Li	ability Company is:
Principal Office A	Address:	Mailing Address:	
3560 NW 72 Aven Miami, Fl 33122	ue	3560 NW 72 Avenue Miami, Fl 33122	
-			
ARTICLE III - R (The Limited Liability C business entity with an	Company cannot serve as its of active Florida registration.) Florida street address	gistered Office, & Registered Agent's own Registered Agent. You must designate an individual of the registered agent are:	idual or another
ARTICLE III - R (The Limited Liability C business entity with an	Company cannot serve as its of active Florida registration.)	wn Registered Agent. You must designate an indivi	idual or another
ARTICLE III - R (The Limited Liability C business entity with an	Company cannot serve as its of active Florida registration.) Florida street address	of the registered agent are: Name	idual or another
ARTICLE III - R (The Limited Liability C business entity with an	Company cannot serve as its of active Florida registration.) Florida street address Dean Patel 12261 SW 1	of the registered agent are: Name	idual or another 2012 JAN SECRET

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's Signature (REQUIRED)

(CONTINUED)

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

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

MGR	Dean Patel	
######################################	3560 NW 72 AVENUE	
	Miami, Florida 33122	
MGRM	AMJAD AZAD	
	3560 NW 72 AVENUE ₹S	201
	Miami, Fl 33122	ر 2
MGRM	SHAMIM AZAD	JAN 13
	3560 NW 72 AVENUE	
	Miami, FI 33122	- TE
	707 LS17	Ó
	754 100	-
(Use attachment if necessa	ary)	
LE V: Effective date, if of	her than the date of filing: 01.10.2012 . (OPTIO	ŅAI
Tective date is listed, the d days after the date of fili	ate must be specific and cannot be more than five business	days

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

Signature of a member or an authorized representative of a member.

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

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)