L/20000/500/

(1	Requestor's Name)
(,	Address)
(,	Address)
(1	City/State/Zip/Phone #)
PICK-UP	☐ WAIT ☐ MAIL
	Business Entity Name)
(1	Document Number)
Certified Copies	Certificates of Status

Special Instructions to Filing Officer:

A. LUNT

FEB -1 2011

EXAMINER

Office Use Only



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COVER LETTER

1	(O: Registration Section Division of Corporations							
s	SUBJECT: Syed Design Gro	oup, LLC						
_			iability Compa	ny				
Т	The enclosed Articles of Organization and	fee(s) are subn	nitted for filing					
P	Please return all correspondence concernia	ng this matter to	the following:					
	Faisal S. Syed							
		Nan	ne of Person					
		Fin	n/Company					
	PO Box 611058							
			Address			产出	7102	
	Rosemary Beach, FL 3	32461				144	0 E NVF 2102	430
	recommend Bodom, 12 c		ite and Zip Code		·	12 M	<u> </u>	
	faisal@di-ltd.com					建	9	F
	E-mail address:	(to be used for fu	ture annual repor	rt notification)		12.50	20C:	· ·
F	For further information concerning this ma	atter, please cal	1:				展	****
F	Faisal Syed	at	(850)	543-5951				
_	Name of Person		Area Code	& Daytime Tele	phone Numbe	r		
E	Enclosed is a check for the following a	mount:						
₽ \$1	25.00 Filing Fee \$130.00 Filing Certificate of		\$155.00 Filing Certified Cop (additional copy	by	\$160.00 F Certificate Certified (additional)	e of Stat Copy	tus &	
	Mailing Addre Registration Sec Division of Co P.O. Box 6327 Tallahassee, FL	tion porations	Registration Division of Clifton Bit 2661 Execution	of Corporations				

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ART	ICLE	E I - 3	Name
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The name of the Limited Liability Company is:

SI	/ed	Design	Groun) I	I C
U)	/ ÇU	Desidi	Oloup	/, L	レレ

(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:		
54 Main Street	PO Box 611058		
Suite 200	Rosemary Beach, FL 3246	1	
Rosemary Beach, FL 32461			
ARTICLE III - Registered Agent, Re (The Limited Liability Company cannot serve as its obusiness entity with an active Florida registration.) The name and the Florida street address Faisal S. Syed	own Registered Agent. You must designate an indi	's Signature JAN 30 PA	T
	Name		
114 East Kir	ngston Rd		
Florida	street address (P.O. Box NOT acceptable)	•	
Rosemary Beac	h _{FL} 32461		•
	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..

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	Faisal S. Syed
	PO Box 611058
	Rosemary Beach, FL 32461
	SE ~
	To have a
	AM 3D A ASS
	अंद्री अ
	F15
(Use attachment if necessary)	
LE V: Effective date, if other than the	e date of filing: (OPTIO

REQUIRED SIGNATURE:

Signature of a member or an authorized epresentative 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. I am aware that any 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.)

Faisal S. Syed

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)