L120000 65255

(Requestor's Name)
(Address)
(Address)
•
(City/State/Zip/Phone #)
(=1,7=1,111,111,111,111,111,111,111,111,1
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
(2004)
O ME Los of Olahan
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
· ·

Office Use Only



300235036643

05/14/12--01014--027 **160.00

Effective Date 5/15/12

12 MAY IL AMIN: 33

ION OF CORPORATIONS

MAY 1'5 2012 T. HAMPTON

COVER LETTER

TO:	Registration Section Division of Corporations
SUBJE	CT: SEYRAN FL LLC
	Name of Limited Liability Company
The end	osed Articles of Organization and fee(s) are submitted for filing.
Please	eturn all correspondence concerning this matter to the following:
	Jfuk Tumanoglu
	Name of Person
	N/A
	Firm/Company
	7770 Heatherton Lane
	Address
F	otomac, MD 20854
	City/State and Zip Code
_	ıfuk53@gmail.com
	E-mail address: (to be used for future annual report notification)
For fur	er information concerning this matter, please call:
Ufuk	Γumanogluat (301 370-0825
	Name of Person Area Code & Daytime Telephone Number
Enclos	d is a check for the following amount:
S125.00	Filing Fee \$\int_{\text{\$130.00 Filing Fee & Certificate of Status}} \begin{array}{ c c c c c c c c c c c c c c c c c c c
	Mailing AddressStreet/Courier AddressRegistration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301

Effective Date 5/15/17

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company	is:
SEYRAN FL LLC	
(Must end with the words "Limited Liz	ability 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:
7770 Heatherton Lane Potomac, MD 20854	7770 Heatherton Lane Potomac, MD 20854
ARTICLE III - Registered Agent, Register (The Limited Liability Company cannot serve as its own Repubusiness entity with an active Florida registration.) The name and the Florida street address of the Devrim Ogun	
Devrim Ogun Nan	ne
507 Birdsong Co	
	address (P.O. Box NOT acceptable)
Longwood	_{FL} 32779
City,	State, and Zip
liability company at the place designated in registered agent and agree to act in this capac statutes relating to the proper and complete	to accept service of process for the above stated limited in this certificate, I hereby accept the appointment as city. I further agree to comply with the provisions of all performance of my duties, and I am familiar with and gistered agent as provided for in Chapter 608, F.S
Registered Agent's Sign	nature (REQUIRED)

(CONTINUED)

Page 1 of 2

12 MAY 14 AM 10: 31

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

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

MGRM	Ufuk Tumanoglu 7770 Heatherton Lane Potomac, MD 20854
	T Glorias, MD 20034
(Use attachment if necess	
	er than the date of filing: 05/15/2012 (OPTIONA te must be specific and cannot be more than five business day

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. 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.)

Ufuk Tumanoglu

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)

12 MAY 14 AM 10: 34