

#L12000/6/006

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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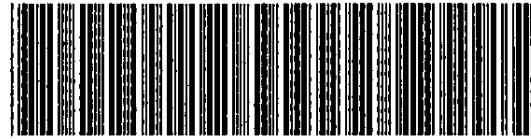
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

K. SALY
EXAMINER

DEC 27 2012



FLORIDA DEPARTMENT OF STATE
Division of Corporations

December 11, 2012

BOGIN MUNNS & MUNNS P.A. / ARLENE C UDICK, ESQ.
8564 CR 466, STE. 305
THE VILLAGES, FL 32162

SUBJECT: SAREDA SUPERMARKET, LLC
Ref. Number: W12000061324

We have received your document for SAREDA SUPERMARKET, LLC and your check(s) totaling \$155.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must contain written acceptance by the registered agent, (i.e. "I hereby am familiar with and accept the duties and responsibilities as registered agent for said corporation/limited liability company"); and the registered agent's signature.

If you have any questions concerning the filing of your document, please call (850) 245-6870.

Karen A Saly
Regulatory Specialist II

Letter Number: 012A00029265

(850) 245-6051.

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: SAREDA Supermarket LLC
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:

Arlene C. Udick, Esq.

Name of Person

Bogin Munns & Munns P.A.

Firm/Company

8564 CR 466, Ste 305

Address

The Villages, FL 32162

City/State and Zip Code

daracheakim@aol.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Arlene C. Udick, Esq. at (352) 391-6031

Name of Person

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|--|--|---|---|
| <input type="checkbox"/> \$125.00 Filing Fee | <input type="checkbox"/> \$130.00 Filing Fee & Certificate of Status | <input checked="" type="checkbox"/> \$155.00 Filing Fee & Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$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
OF
SAREDA SUPERMARKET, LLC**

The undersigned, being authorized to execute and file these Articles of Organization, hereby certifies that:

ARTICLE I – Name

The name of the limited liability company (hereinafter referred to as the “Company”) is “SAREDA Supermarket, LLC”.

ARTICLE II – Principal Place of Business

The street address of the Company is: 8401 North Armenia Avenue, Tampa, Florida 33604.

ARTICLE III – Mailing Address

The mailing address of the principal office of the Company is: 1796 Strathmore Circle, Mt. Dora, Florida 32757.

ARTICLE IV – Registered Agent

The name and the Florida street address of the initial registered agent are:

Dara Chea Kim
1796 Strathmore Circle
Mt. Dora, Florida 32757

ARTICLE V – Management

The Company is to be managed by Dara Chea Kim

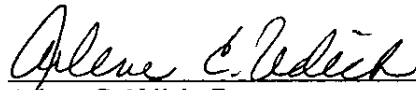
ARTICLE V – Limitation of Agency Authority of Members

Pursuant to Section 608.4235 of the Florida Limited Company Act, no member of the Company shall be an agent of the Company solely by virtue of being a member.

ARTICLE VI – Limited Liability Purpose

The company is organized to own and operate a grocery store and to engage in such other lawful activities as are reasonably necessary, convenient, or incidental to that purpose and to engage in any business permitted under the Act.

IN WITNESS WHEREOF, I have signed these Articles of Organization as an authorized representative of a member and acknowledged them to be my act this 7th day of December 2012.


Arlene C. Udick, Esq.

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLES OF ORGANIZATION
OF
SAREDA SUPERMARKET, LLC

I hereby accept the designation as registered agent to accept service of process for the above stated limited liability company at the place designated in this statement. I am familiar with and accept the obligations of my position as registered agent under Chapter 608, Florida Statutes.

(In accordance with section 608.408(3), Florida Statutes, the execution of this statement constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)


DARA CHEA KIM, Registered Agent