

Division of Corporations Electronic Filing Cover Sheet

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Fax Number : (850) 617-6383

From:

Account Name : A.A.ALI, CPA

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# FLORIDA LIMITED LIABILITY CO. SATYA HOLDING LLC

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FEB - 6 2013



February 5, 2013

A.A.ALI, CPA

FLORIDA DEPARTMENT OF STATE
Division of Corporations

SUBJECT: SATYA HOLDING, LLC.

REF: W13000006819

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

Pursuant to section 608.409(2), F.S., the effective date must be specific, cannot be more than five business days prior to the date of filing or more than 90 days after the date of filing. Our office received your document on . Please amend your document accordingly.

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

.Karen A Saly Regulatory Specialist II FAX Aud. #: H13000026538 Letter Number: 313A00002718



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# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

#### ARTICLE 1 - Name:

The name of the Limited Liability Company is:

## SATYA HOLDING, LLC.

(Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")

#### **ARTICLE II - Address:**

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

406 MERLOT DR. OCOEE, FL 34761

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:
(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

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

SATYANAND PERSAUD 406 MERLOT DR. OCOEE, FL 34761

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..

SATYANAND PERSAUD/ Registered Agent's Signature

(((H13000026538 3)))

From: Amy Shiwnarain

Fax: 4072980660

To: DIVISION OF CORPOR Fax: +1 (850) 617-6383 (((H13000026538 3))))

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

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

"MGR" = Manager
"MGRM" = Managing Member

SATYANAND PERSAUD - MGRM 406 MERLOT DR. OCOEE, FL 34761

ONIE PERSAUD - MGRM 406 MERLOT DR. OCOEE, FL 34761

ARTICLE V: Effective date, if other than the date of filing: 2/5/2013 (If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

### **REQUIRED SIGNATURE:**

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.)

SATYANAND PERSAUD

Typed or printed name of signee

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