L13000030551

(Re	equestor's Name)	<u> </u>
(Ad	dress)	
(Ad	dress)	
(Cit	ty/State/Zip/Phone	<i>⇒ #</i>)
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



300244206863

02/25/13--01016--022 **i25.00

2013 FEB 25 AM 8 22
SECRUTARY OF STATE

J. SAULSBERRY EXAMINER

FEB 2 7 2013

COVER LETTER

TO:

Registration Section
Division of Corporations

SUBJECT

SHRI BHOLE, 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:

SARAH GULATI, ESQ.

Name of Person

GULATI LAW, P.L.

Firm/Company

409 MONTGOMERY ROAD, UNIT 131

Addres

ALTAMONTE SPRINGS, FL 32714

City/State and Zip Code

OFFICE@GULATILAW.COM

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

For further information concerning this matter, please call:

SARAH GULATI. ESQ.

,407

900-5054

Name of Person

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

■\$125.00 Filing Fee

□\$130.00 Filing Fee & Certificate of Status

□\$155.00 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

ARTIČLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:			
The name of the Limited Liability Company is:			
SHRI BHOLE, LLC			
(Must end with the words "Limited Liability	y Company, "L.L.C.," or "LLC.")		
ARTICLE II - Address:		•	
The mailing address and street address of the prin	ncipal office of the Limited Liability	y Company	is:
Principal Office Address:	Mailing Address:		
115 LYNCHFIELD AVE	bon W. Lancaste	er Rd	
ALTAMONTE SPRINGS, FL 32714	600 W. Lancaste Orlando, FL 32	2309.	
ARTICLE III - Registered Agent, Registered			
The Limited Liability Company cannot serve as its own Register business entity with an active Florida registration.)	red Agent. You must designate an individual or	ranomer	
		Z 20	
The name and the Florida street address of the registered agent are:			
GULATI LAW, P.L. (Attn: Sarah Gula	ati, Esq.)	2013FEB 25 AM 8 22 SEURCIARY OF STATE ALL AHASSEFT, FLORID	T F IT
Name		\frac{1}{2} \frac\	r
400 Manhanana - Manda Hallada			i T
409 Montgomery Road, Unit 131	ess (P.O. Box NOT acceptable)	Pr SF!	, ,
	ess (F.O. Box <u>NOT</u> acceptable)	® <u>×</u>	\$
Altamonte Springs		22 115 115	
City, State	e, and Zip	~	
Having been named as registered agent and to a	ccept service of process for the above	e stated lim	ited
liability company at the place designated in th			
registered agent and agree to act in this capacit		•	
all statutes relating to the proper and complete		*	
and accept the obligations of my position as reg	istered agent as provided for in Cha	ıpter 608, F.	<i>S</i>
Cala	4		
Registered Agent's Signatur	re (REQUIRED)		
CONTENT	(ED)		
(CONTINU	irin)		

Page 1 of 2

ARTICLE IV- Manager(s) or Managing Member(s):
The name and address of each Manager or Managing Member is as follows:

Title: "MGR" = Manager "MGRM" = Managing Member	Name and Address:	
MGRM	DASHRATH B. PATEL	
(Use attachment if necessary)	- Annual Control of the Control of t	
(Use attachment if necessary)	1 1 CONTROL	
CLE V: Effective date, if other than the	he date of filing: (OPTION st be specific and cannot be more than five busing	ness da
CLE V: Effective date, if other than the effective date is listed, the date mu	ist be specific and cannot be more than five husin	ness da
CLE V: Effective date, if other than the effective date is listed, the date mu	ist be specific and cannot be more than five husin	ness da 2013 FEB 2
CLE V: Effective date, if other than the effective date is listed, the date muto or 90 days after the date of filing.) REQUIRED SIGNATURE:	ist be specific and cannot be more than five busin	es 2013 FEB 25 AM
CLE V: Effective date, if other than the effective date is listed, the date muto or 90 days after the date of filing.) REQUIRED SIGNATURE:	ist be specific and cannot be more than five husin	8 2013 FEB 25 AM 8 2
CLE V: Effective date, if other than the effective date is listed, the date musto or 90 days after the date of filing.) REQUIRED SIGNATURE: Signature of a mem (In accordance with section 6 constitutes an affirmation und I am aware that any false inforconstitutes a third degree felor	ist be specific and cannot be more than five busin	da 2013 FEB 25 AM 8a

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)