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TALLABASSEE FLORINA

TARRED DEC 4 2013

(850) 245-6051.

COVER LETTER

TO: **Registration Section Division of Corporations** ASHAYS L.L.C., 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: ASHISH STEPHEN Name of Person ASHAYS L.L.C., Firm/Company 7557 PARK SPRINGS CIRCLE Address ORLANDO- FLORIDA-32835 City/State and Zip Code ASH3ISH@MAC.COM E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: at (407) 347-8908 ASHISH STEPHEN Name of Person Area Code & Daytime Telephone Number Enclosed is a check for the following amount: **■\$125.00** Filing Fee □\$130.00 Filing Fee & □\$155.00 Filing Fee & □ \$160.00 Filing Fee, Certificate of Status Certified Copy Certificate of Status & Certified Copy (additional copy is enclosed) (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



FLORIDA DEPARTMENT OF STATE Division of Corporations

November 19, 2013

ASHISH STEPHEN 7557 PARK SPRINGS CIRCLE ORLANDO, FL 32835

SUBJECT: ASHAYS L.L.C. Ref. Number: W13000063924

We have received your document for ASHAYS L.L.C. and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an administratively dissolved/revoked entity. Names of administratively dissolved/revoked entities are not available for one year from the date of administrative dissolution/revocation unless the dissolved/revoked entity provides the Department of State with an affidavit or letter stating that they have no intention of reinstating, therefore, releasing the name for use to another entity.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Tim Burch Regulatory Specialist II

Letter Number: 113A00026696

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

	T. T		
ASHAY INVESTM		nited Liability Company, "L.L.C.," or "LLC.")	
	(Must and with the Moras Emi	med clausing company, c.c.e., or case.	
ARTICLE II			
The mailing ad	dress and street address of	of the principal office of the Limited Liability Co	mpany is:
Principal Offi	ce Address:	Mailing Address:	
7557 PARK SPRII	NGS CIRCLE	7557 PARK SPRINGS CIRCLE	
ORLANDO-FL-328	35	ORLANDO-FL-32835	
(The Limited Liabili		gistered Office, & Registered Agent's Signatu own Registered Agent. You must designate an individual or anot	
(The Limited Liabili business entity with	ity Company cannot serve as its on a nactive Florida registration.) the Florida street address		her 13
(The Limited Liabili business entity with	ity Company cannot serve as its on han active Florida registration.)	own Registered Agent. You must designate an individual or anot	her 13
(The Limited Liabili business entity with	ity Company cannot serve as its on a nactive Florida registration.) the Florida street address	own Registered Agent. You must designate an individual or another of the registered agent are:	her 13 DEC -3
(The Limited Liabili business entity with	ity Company cannot serve as its of han active Florida registration.) the Florida street address ASHISH STEPHEN 7557 PARK SPRINGS C	own Registered Agent. You must designate an individual or another of the registered agent are:	13 DEC -3 THE
(The Limited Liabili business entity with	ity Company cannot serve as its of han active Florida registration.) the Florida street address ASHISH STEPHEN 7557 PARK SPRINGS C	own Registered Agent. You must designate an individual or another of the registered agent are:	her 13 DEC -3

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)

Page 1 of 2

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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:

MGRM	ASHISH STEPHEN
	7557 PARK SPRINGS CIRCLE
	ORLANDO-FL-32835
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(Use attachment if necessary	/)
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REQUIRED SIGNATURE:

Signature of a member of 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.)

ASHISH STEPHEN

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)

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