## 4000047798

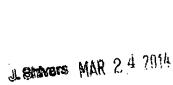
(Re	questor's Name)	
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(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	me)
(Do	ocument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to	Filing Officer:	
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March 11, 2014

R MICHAEL BEHARRY 3725 NW 106 DR CORAL SPRINGS, FL 33065

SUBJECT: MULKAI & COMPANY, LLC

Ref. Number: W14000015566

We have received your document for MULKAI & COMPANY, LLC and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

Please return the corrected original and one copy of 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.

Justin M Shivers
Regulatory Specialist II
Registration/Qualification Section

Letter Number: 514A00005247

## **COVER LETTER**

TO: Registration Section Division of Corporations		
SUBJECT: Mulkai & Company, LLC Name of Lin	nited Liability Company	
The enclosed Articles of Organization and fee(s) at Please return all correspondence concerning this m	_	
R. Michael Beharry	Name of Person	<u></u>
Mulkai & Company, LLC	Firm/Company	
3725 NW 106 Drive	Address	<del></del>
Coral Springs, FL 33065	City/State and Zip Code	<del></del>
7property@bellsouth.net E-mail address: (to be used) For further information concerning this matter, plea	d for future annual report notificati	on)
R. Michael Beharry at ( 9	954 ) <u>345 - 9538</u> Area Code Daytime Tele	phone Number
Enclosed is a check for the following amount:  \$\Boxed{125.00} \\$125.00 \text{ Filing Fee } \Boxed{\text{S130.00 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	Street/Courier Addre Registration Section Division of Corporation Clifton Building	

2661 Executive Center Circle Tallahassee, FL 32301

P.O. Box 6327 Tallahassee, FL 32314

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:			
The name of the Limited Liability Company is:			
Mulkai & Company, LLC			
(Must end with the words "Limit	ed Liability 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:		
3725 NW 106 Drive	3725 NW 106 Drive		
Coral Springs, FL 33065	Coral Springs, FL 33065		
		<del></del>	
ARTICLE III - Registered Agent, Registered Office			
(The Limited Liability Company cannot serve as its ow another business entity with an active Florida registrat		individ	lual or
•	•		
The name and the Florida street address of the register	ed agent are:		
R. Michael Beharry	· .	至是	
Nan Nan	ne	- :	7 m. 2m. H - 2
3725 NW 106 Drive			-5) -5)
Florida street address (P.O. B	ox NOT acceptable)		
Coral Springs	FL 33065	• :	
City	Zip		ij.
Having been named as registered agent and to accept.	sanian of pringers for the above stated limited	51. Jimbilia	
the place designated in this certificate, I hereby according			
capacity. I further agree to comply with the provision			
of my duties, and I am familiar with and accept the c Cha	obligations of my position as registered agent appear 605, F.S	as prov	vided for in
-QI			
Kymul / 3 2	hous		
Registered Agent's Sign	nature (REQUIRED)		

(CONTINUED)

Page 1 of 2

Title:	Name and Address:
"AMBR" = Authorized Member	
"MGR" = Manager	
MGR	Ramona C. Beharry
	3725 NW 106 Drive
	Coral Springs, FL 33065
MGR	R. Michael Beharry
	3725 NW 106 Drive
	Coral Springs, FL 33065
MGR	Marc A. Beharry
MOIT	3725 NW 106 Drive
	Coral Springs, FL 33065
	Corai Springs, FL 33000
MGR	Andrea N. Beharry
	3725 NW 106 Drive
	Coral Springs, FL 33065
(Use attachment if necessary)  EV: Effective date, if other than the fective date is listed, the date must be of filing.)	date of filing: (OPTIONAL) se specific and cannot be more than five business days prior to or 90
E V: Effective date, if other than the ective date is listed, the date must b	date of filing: (OPTIONAL) se specific and cannot be more than five business days prior to or 90
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E V: Effective date, if other than the ective date is listed, the date must be of filing.)  E VI: Other provisions, if any.  REQUIRED SIGNATURE:  Signature of: (In accordance with section)	a member or an authorized representative of a member. on 605.0203 (1) (b), Florida Statutes, the execution of this document
E V: Effective date, if other than the ective date is listed, the date must be of filing.)  E VI: Other provisions, if any.  REQUIRED SIGNATURE:  Signature of a constitutes an affirmation	a member or an authorized representative of a member. on 605.0203 (1) (b), Florida Statutes, the execution of this document under the penalties of periury that the facts stated herein are true.
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ARTICLE IV-

Page 2 of 2