

L14 000099401

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

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14 JUN 20 11 09 39
FILING OFFICE
CHICAGO, ILLINOIS

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: TECHZIO 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:

BINA GAJJAR

Name of Person

Firm/Company

9622 OAK GLADE AVE

Address

TAMPA FL 33647

City/State and Zip Code

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

For further information concerning this matter, please call:

BINA GAJJAR

Name of Person

at (239) 595-1396

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

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

TECHZIO LLC

(Must end with the words "Limited 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:

9622 OAK GLADE AVE
TAMPA FL 33647

9622 OAK GLADE AVE
TAMPA FL 33647

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:

HARSHA PATEL

Name

31100 MANDOLIN CAY AVE

Florida street address (P.O. Box **NOT** acceptable)

WESLEY CHAPEL

FL 33543

City

Zip

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 605, F.S..

H. Patel

Registered Agent's Signature (REQUIRED)

(CONTINUED)

14 JUN 20 14 09 38
TALLAHASSEE, FLORIDA
STATE OF FLORIDA

ARTICLE IV-

The name and address of each person authorized to manage and control the Limited Liability Company:

Title:

"AMBR" = Authorized Member

"MGR" = Manager

MGRM _____

Name and Address:

BINA GAJJAR

9622 OAK GLADE AVE

TAMPA FL 33647

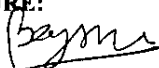
(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: _____ (OPTIONAL)

(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.)

ARTICLE VI: Other provisions, if any.

REQUIRED SIGNATURE:



Signature of a member or an authorized representative of a member.

(In accordance with section 605.0203 (1) (b), 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.)

BINA GAJJAR

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)

14 JUN 20 01 51 33
RECEIVED
JUN 14 2014
CLERK OF THE COURT
STATE OF FLORIDA

L14 000099401

TECHZIO LLC
Bina Gajjar
8355 Laurel Lakes Blvd
Naples FL 34119

RECEIVED

14 JUN 18 PM 12:14

RECEIVED
JUN 14 2018
FBI - MIAMI

Division of Corporations
Amendment Section
PO BOX 6327
Tallahassee, FL 32314

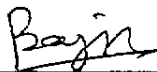
Re: Document #:L13000147275
TECHZIO LLC

To Whom It May Concern,

Please let this letter serve as proof that we have no intention of revoking the dissolution of the corporation, TECHZIO LLC, therefore releasing the name for use to another entity.

If you require any further information in order to process this request, please contact my accountant, Harsha Patel at (813) 817-5402.

Sincerely,



Bina Gajjar

Member
TECHZIO LLC