

L15000037060

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

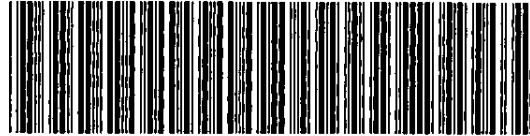
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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700268693817

01/28/15--01008--010 \*\*130.00

Effective Date 3/1/15

FILED  
15 FEB 24 PM 3:49  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FEB 27 2015

T. HAMPTON

7203-510

**COVER LETTER**

**TO: Registration Section  
Division of Corporations**

**SUBJECT:**

INTERNATIONAL IMPORTS 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:

SAMEER MOTLANI

Name of Person

INTERNATIONAL IMPORTS

Firm/Company

1309 E. Land Street - Rd

Address

Orlando FL 32824

City/State and Zip Code

Srmotlani@yahoo.com

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

For further information concerning this matter, please call:

SAMEER MOTLANI at ( 407 ) 341 4594

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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

REC-10

15 FEB 24 AM 10:00

FLORIDA DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
BUREAU OF COMMERCIAL  
INFORMATION SERVICES

February 9, 2015

SAMEER MOTLANI  
1309 E LAND STREET RD  
ORLANDO, FL 32824

SUBJECT: INTERNATIONAL IMPORTS LLC  
Ref. Number: W15000009077

We have received your document for INTERNATIONAL IMPORTS LLC and your check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Pursuant to section 605.0207, 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 January 28, 2015. Please amend your document accordingly.

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.

Tammy Hampton  
Regulatory Specialist III

Letter Number: 115A00002587

Effective Date

3/1/15

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

INTERNATIONAL IMPORTS 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:

10233 LAXTON ST.  
Orlando FL  
32824

Mailing Address:

10233 LAXTON ST  
Orlando  
FL 32824

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:

SAMEER MOTLANI

Name

10233 LAXTON ST.

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

Orlando

City

FL 32824

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.



Registered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

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TALLAHASSEE, 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

**Name and Address:**

NAZEEM MOTLANI  
mgr

10233 LANTON ST  
Orlando FL 32824

(Use attachment if necessary)

**ARTICLE V:** Effective date, if other than the date of filing: 03/01/2015 (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]*

**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.)

SAMFER MOTLANI

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)

**FILED**  
15 FEB 24 PM 3:49  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA