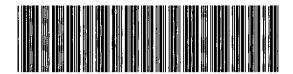
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(Requestor's Name)		
(Address)		
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(City/State/Zip/Phone #)		
PICK-UP WAIT MAIL		
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COVER LETTER

	Registration Section Division of Corporations	
SUBJEC	Family Heritage Archivists	
SOBJEC		of Limited Liability Company
The encl	osed Articles of Organization and fee	(s) are submitted for filing.
Please re	turn all correspondence concerning the	is matter to the following:
	Sushil Gupta	
		Name of Person
		Firm/Commons
		Firm/Company
	16949 S.W. 16th Street	
		Address
	Pembroke Pines, Florida 33027	·
		City/State and Zip Code
	gupta_skgl@yahoo.com E-mail address: (to be	used for future annual report notification)
For further	r information concerning this matter,	
	Sushil Gupta	614 614 602 9578
	Name of Person	Area Code Daytime Telephone Number
Enclosed	l is a check for the following amount:	
\$125.00	Filing Fee \$130.00 Filing Fee Certificate of State	
	Mailing Address	Street Address
	New Filing Section Division of Corporations	New Filing Section Division of Corporations
	P.O. Box 6327	Clifton Building 2661 Executive Center Circle
	Tallahassee, FL 32314	2001 Executive Center Circle

Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE Division of Corporations

August 11, 2015

SUSHIL GUPTA 16949 SW 16TH STREET PEMBROKE PINES, FL 33027

SUBJECT: FAMILY HERITAGE ARCHIVISTS

Ref. Number: W15000053913

We have received your document for FAMILY HERITAGE ARCHIVISTS 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 name of a limited liability company must contain the words "Limited Liability Company," the abbreviation "L.L.C.," or the designation "LLC." The following suffixes are no longer acceptable: "Limited Company," "L.C.," and "LC." The abbreviations "Ltd." and "Co.", also are no longer acceptable. 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) 245-6052.

Teresa Brown Regulatory Specialist II

Letter Number: 915A00016876

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

ARTICLE II - Address:

		•
ARTICLES OF ORGANIZATION FOR FLOR	RIDA LIMITED LI	ABILITY COMPANY 20/5 SEP A E CARE A A A 10: 49 L.L.C.," or "LLC.") ability Company is:
ARTICLE I - Name:		0/5 cm
The name of the Limited Liability Company is:		SE OCP O
		ALICHET AN.
Family Heritage Archivists LLC.		AHARY OF 46
(Must end with the words "Limited Liab	ility Company, "	L.L.C.," or "LLC.")
•		00/5
ARTICLE II - Address:		
The mailing address and street address of the principal office	of the Limited Li	ability Company is:
Principal Office Address:		Mailing Address:
16949 S.W. 16th Street	16949	S.W. 16th Street
Pembroke Pines		oke Pines
Florida, 33027	Florida	, 33027
ARTICLE III - Registered Agent, Registered Office, & Re The Limited Liability Company cannot serve as its own Regionother business entity with an active Florida registration.) The name and the Florida street address of the registered agent	stered Agent. Yo	
0.110		
Sushil Gupta		
Nar	me	
16949 S.W. 16th Street		·
Florida street address (P.C	D. Box NOT acce	eptable)
Pembroke Pines	Florida	33027
City	State	7in

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..

(CONTINUED)

Page 1 of 2

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

<u>Title:</u> "AMBR" = Authorized Member	Name and Address:
"MGR" = Manager AMBR and MGR	Sushil Gupta 16949 S.W. 16th Street Pembroke Pines, Florida 33027
	
(Use attachment if necessary)	
he date of filing.)	cannot be more than five business days prior to or 90 days after oplicable statutory filing requirements, this date will not be listed as
ARTICLE VI: Other provisions, if any.	
REQUIRED SIGNATURE:	Danpta
This document is executed in acco	an authorized representative of a member. ordance with section 605.0203 (1) (b), Florida Statutes. ion submitted in a document to the Department of State

constitutes a third degree felony as provided for in s.817.155, F.S.

SUSHIL GUPT
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)