

12/10/2015

10:26 Delaney Corporate Services

FAX 518 465 7883

P.001/005

L15000203873

**Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet**

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

To:
Division of Corporations
Fax Number : (850) 617-6381

From:
Account Name : DELANEY CORPORATE SERVICES
Account Number : 120140000112
Phone : (800) 717-2810
Fax Number : (518) 465-7883

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: Jeff@delaneycorporate.com

**FLORIDA LIMITED LIABILITY CO.
A & RAJ REMODELING LLC**

Certificate of Status	0
Certified Copy	1
Page Count	01
Estimated Charge	\$155.00

1/1/11

12/10/2015 10:27 Delaney Corporate Services

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P.003/005

RX Date/Time
850-817-6381

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12/4/2015 11:15:00 AM PAGE

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December 4, 2015

FLORIDA DEPARTMENT OF STATE
Division of Corporations

DELANEY CORPORATE SERVICES

SUBJECT: A & R REMODELING LLC
REF: W15000078473

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refile the complete document, including the electronic filing cover sheet.

Please list the complete principal office address.

You must insert the title or capacity of person(s) authorized to manage this limited liability company above the name(s) and address(es) listed. Such titles may include: Manager (MGR), Authorized Member (AMBR), Authorized Person (AP), or Authorized Representative (AR).

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.

The document number of the name conflict is P14000034366 - AR REMODELING INC.

If your business entity does not intend to transact business until January 1st of the upcoming calendar year, you may wish to revise your document to include an effective date of January 1st. If you do not list an effective date of January 1st, your business entity will become effective this calendar year and it will be required to file an annual report and pay the required annual report fee for the upcoming calendar year this coming January, which is merely weeks away. By listing an effective date of January 1st, the entity's existence will not begin until January 1st of the upcoming year and will, therefore, postpone the entity's requirement to file an annual report and pay the required annual report filing fee until the following calendar year.

P.O BOX 6327 - Tallahassee, Florida 32314

12/10/2015 10:27 Delaney Corporate Services

(FAX) 518 465 7883

P.004/005

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Please return your document, please 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

FAX Aud. #: H15000285984
Letter Number: 915A00025422

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

A + BAJ REMODELING LLC
(Must end with the words "Limited Liability Company, "LLC," or "LLC.")

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:

821 GRANTHAM DR
KISSIMMEE FL 34758

Mailing Address:

821 GRANTHAM DR
KISSIMMEE FL 34758

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:

DHANRAJ KESHWAR

Name

821 GRANTHAM DR

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

KISSIMMEE FL 34758

City

State

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)

ARTICLE IV-

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

Title:

"AMBR" = Authorized Member

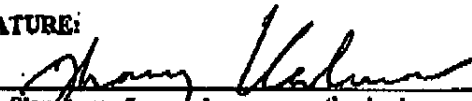
"MGR" = Manager

MGR**Name and Address:**DHANRAJ KESHWAR
821 GRANTHAM DR
KICKIMMEE FL 34758

(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.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.**ARTICLE VI:** Other provisions, if any.**REQUIRED SIGNATURE:**

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

This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. 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.

DHANRAJ KESHWAR

Typed or printed name of signer

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)