## L/60000/5555/

(Ro	equestor's Name)	_
(Ac	ddress)	
(Ad	ddress)	
(C	ity/State/Zip/Phon	e #)
PICK-UP	WAIT	MAIL
(Bu	usiness Entity Nar	me)
(De	ocument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



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## COVER LETTER

	egistration Section ivision of Corporations		
SUBJECT	OKFLO LLC		
SUBJECT		Limited Liabili	y Company
The enclos	sed Articles of Organization and fee(s)	are submitted	for filing.
Please retu	arn all correspondence concerning this	matter to the fo	ollowing:
	Rakesh Trivedi		
		Name of	Person
		Firm/Cor	npany
	10863 E 41st Street		
		Addre	ess
	Tulsa OK. 74146		
	rextrivedi@hotmail.com	City/State and	I Zip Code
	E-mail address: (to be us	ed for future a	nnual report notification)
For further i	information concerning this matter, ple	ase call:	
	Rex Trivedi	918	760-0287
	Name of Person	,	Daytime Telephone Number
Enclosed i	s a check for the following amount:		
\$125.00 F	Siling Fee \$130.00 Filing Fee & Certificate of Status	LCertific	of Filing Fee & \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Address New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Street Address  New Filing Section  Division of Corporations  Clifton Building  2661 Executive Center Circle  Tallahassee, FL 32301

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the Limited Liability Company is:	
OVELOTIC	
OKFLO LLC  (Must end with the words "Limited Liability	y Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the principal office of t	he Limited Liability Company is:
Principal Office Address:	Mailing Address:
10863 E 41st Street Tulsa OK. 74146	10863 E 41st Street Tulsa OK. 74146

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or

The name and the Florida street address of the registered agent are:

another business entity with an active Florida registration.)

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

**ARTICLE I - Name:** 

Dixit Kadakia			_
701, BRICE	Name ELL KEY	BWD, APT#	סוסו
Florida street addre	ss (P.O. Box <u>NO</u>	T acceptable)	,
<u>,                                    </u>	FL		_
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)

Page 1 of 2

	thorized Member	Name and Address:
"MGR" = Man	ager	
AMBR	<del></del>	Dixit Kadakia
•		10863 E 41st Street
		Tulsa OK. 74146
AMBR		Rakesh Trivedi
	<del></del>	10863 Es 41st Street
		Tulsa OK. 74146
	<u> </u>	
<u></u>	Married Street Spironson	
/Han attachman	+ ifmananna)	
(Use attachmen	t if necessary)	
ICLE V: Effective of	date, if other than the date	e of filing: <u>01-01-2016</u> . (OPTIONAL)
ICLE V: Effective of the control of	date, if other than the date	e of filing: 01-01-2016 . (OPTIONAL) pecific and cannot be more than five business days prior to or 90 day
ICLE V: Effective ( a effective date is listed at the offiling.)	date, if other than the date ted, the date must be sp	ecific and cannot be more than five business days prior to or 90 day
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Page 2 of 2

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)

Typed or printed name of signee

Rakesh Trivedi