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## COVER LETTER

	Registration Section Division of Corporations		
SUBJEC <sup>*</sup>	Sunsiri,LLC		
SUBJEC		of Limited Liab	ility Company
The enclo	sed Articles of Organization and fe	e(s) are submitte	ed for filing.
Please ret	urn all correspondence concerning	this matter to the	following:
	Sundeep Shah		
		Name o	of Person
		Firm/C	Company Company
	25940 San Rafeal CT.		
		Ado	iress
	Howey in the Hills FL 34737		
	sundcep.shahmd@gmail.com	City/State a	nd Zip Code
	E-mail address: (to be	e used for future	annual report notification)
For further i	information concerning this matter,	please call:	
	Sundeep Shah	917 at (	704-9071
	Name of Person	Area Code	Daytime Telephone Number
Enclosed i	is a check for the following amount	:	
\$125.00 F	Filing Fee \$130.00 Filing Fee Certificate of State	us Certii	.00 Filing Fee & \$160.00 Filing Fee, fied Copy nal copy is enclosed) Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Address New Filing Section		Street Address New Filing Section

New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 New Filing 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:	
		•
Sunsiri, LLC.		
-	vith the words "Limited Liabilit	y Company, "L.L.C.," or "LLC.")
ARTICLE II - Address:	duran Calana di La Consta	1.11.5.11.12.0
The maining address and street ad	dress of the principal office of t	the Limited Liability Company is:
<u>Principa</u>	l Office Address:	Mailing Address:
25940 San Rafeal CT		same as Principal office Address
Howey in the Hills		same we trimely at office ridateso
FL-34737		
ARTICLE III - Registered Ages (The Limited Liability Company of another business entity with an ac	cannot serve as its own Registe	tered Agent's Signature: red Agent. You must designate an individual or
The name and the Florida street a	ddress of the registered agent a	re:
	Sundeep Shah	
	Name	<del></del>
	25940 San Rafeal CT.	NOT
	<ul> <li>Florida street address (P.O. F</li> </ul>	lox NOT accentable)

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.

State

Howey in the Hills
City

(CONTINUED)

stered Agent's Signature (REQUIRED)

Page 1 of 2

"AMBR" = Authorized Memb	Name and Address: er
"MGR" = Manager MGR	SUNDEEP SHAH
Will the state of	25940 SAN RAFEAL CT.
	HOWEY IN THE HILLS FL 34737
AMBR	PANTHIPA LAOWANSIRI
<del></del>	25940 SAN RAFEAL CT,
	HOWEY IN THE HILLS FL 34737
(Use attachment if necessary)	
ARTICLE V: Effective date, if other tha	in the date of filing: 06/01/2016 . (OPTIONAL)
(If an effective date is listed, the date m the date of filing.)	nust be specific and cannot be more than five business days prior to or 90 days a
Note: If the date inscrted in this block	does not meet the applicable statutory filing requirements, this date will not be liste
the document's effective date on the De	partment of State's records.
ARTICLE VI: Other provisions, if any.	
ARTICLE VI: Other provisions, if any.	
ARTICLE VI: Other provisions, if any.	
ARTICLE VI: Other provisions, if any.  REOUIRED SIGNATURE:	
REOUIRED SIGNATURE:	
Signatu	ry of a member or an authorized representative of a member. this executed in accordance with section 605.0203 (1) (b), Florida Statutes.

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 State (Co.)

\$ 5.00 Certificate of Status (Optional)