6000 400 SU

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(Address)	
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(City/State/Zip/Phone #)	
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(Business Entity Name)	
(Document Number)	
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07/19/16--01002--011 **130.00



COVER LETTER

	Registration Section Division of Corporations	
CHD IEC	AKS HOMES LLC	
SUBJEC		nited Liability Company
The enclo	osed Articles of Organization and fee(s) are	e submitted for filing.
Please ret	turn all correspondence concerning this ma	atter to the following:
	NIRANJAN. K. PANJWANI	
		Name of Person
	AKS HOMES LLC	
		Firm/Company
	4813 BOAT LANDING DRIVE	
		Address
	SAINT AUGUSTINE FL- 32092	
	C nkpanjwani@yahoo.com	ity/State and Zip Code
	E-mail address: (to be used	for future annual report notification)
For further	information concerning this matter, please	e call:
	Niranjan K Panjwani	904 422-4142
		rea Code Daytime Telephone Number
Enclosed	is a check for the following amount:	
\$125.00	Filing Fee \$\frac{130.00}{\text{Filing Fee & Certificate of Status}}	\$155.00 Filing Fee & \$160.00 Filing Fee, Certified Copy (additional copy is enclosed) \$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

AKS HOMES LLC	
(Must end with the words "Limited Lia	bility Company, "L.L.C.," or "LLC.")
ARTICLE II - Address:	
he mailing address and street address of the principal office	of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
4813 BOAT LANDING DRIVE	4813 BOAT LANDING DRIVE
SAINT AUGUSTINE FL-32092	SAINT AUGUSTINE FL-32092
RTICLE III - Registered Agent Registered Office & R	egistered Agent's Signature
The Limited Liability Company cannot serve as its own Regnother business entity with an active Florida registration.)	gistered Agent. You must designate an individual or ent are:
The Limited Liability Company cannot serve as its own Regnother business entity with an active Florida registration.) The name and the Florida street address of the registered ago NIRANJAN K PANJW	gistered Agent. You must designate an individual or
	gistered Agent. You must designate an individual or ent are: ANI me
The Limited Liability Company cannot serve as its own Regnother business entity with an active Florida registration.) The name and the Florida street address of the registered ago NIRANJAN K PANJW Na 4813 BOAT LANDING	gistered Agent. You must designate an individual or ent are: ANI me

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..

City

State

Zip

Registered Agont's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

16 JUL 19 MH11: 47

'AMBR" = A		Name and Address:
	thorized Member	
"MGR" = Ma:		NUDANIANI W DANIMANI
MGR	 	NIRANJAN K PANJWANI 4813 BOAT LANDING DRIVE
		SAINT AUGUSTINE FL-32092
		SAINT AUGUSTINE FL-32092
AMBR		MONICA ARORA
THAIDIC		9027 HAMPTON LANDING DRIVE EAST
		JACKSONVILLE FL-32256
		DITOROGITY TODAY
		
EV: Effective ctive date is I		of filing:07/15/2016 (OPTIONAL) ecific and cannot be more than five business days prior to or 90
EV: Effective ective date is I of filing.) the date insertiment's effective EVI: Other properties of the properties of t	date, if other than the date sted, the date must be speed in this block does not not date on the Department ovisions, if any.	ecific and cannot be more than five business days prior to or 90 neet the applicable statutory filing requirements, this date will not
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EV: Effective ective date is I of filing.) the date inserment's effective EVI: Other properties	date, if other than the date sted, the date must be speed in this block does not not a date on the Department ovisions, if any. Signature of a me This document is execut I am aware that any falso constitutes a third degree	ecific and cannot be more than five business days prior to or 90 meet the applicable statutory filing requirements, this date will not of State's records. The control of State of a member of an authorized representative of a member of an authorized representative of a member of a member of an accordance with section 605.0203 (1) (b), Florida Statutes of information submitted in a document to the Department of State

ARTICLE IV-

\$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)