

# L16000208836

\_\_\_\_\_  
(Requestor's Name)

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(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

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PICK-UP

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WAIT

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MAIL

\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

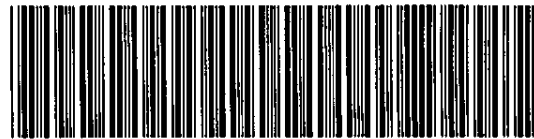
Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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Office Use Only

N. SAMS

NOV 16 2016



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11/14/16--01018--017 \*\*125.00

2016 NOV 14 PM 4:00  
FILING OFFICE  
HILARASHI

**COVER LETTER**

**TO: Registration Section  
Division of Corporations**

**SUBJECT:** Rising Sun Hospitality, LLC  
Name of Limited Liability Company

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Matthew C. Weiner, Esq.

Name of Person

Weiner, Shearouse, Weitz, Greenberg & Shawe, LLP

Firm/Company

P.O. Box 10105

Address

Savannah, GA 31412

City/State and Zip Code

mweiner@wswgs.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Matthew Weiner                      912                      233-2251  
at (                      )  
Name of Person                      Area Code                      Daytime Telephone Number

Enclosed is a check for the following amount:

- ☒ \$125.00 Filing Fee      ☐ \$130.00 Filing Fee & Certificate of Status      ☐ \$155.00 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

ARTICLE I - Name:

The name of the Limited Liability Company is:

Rising Sun Hospitality, LLC

(Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")

ARTICLE II - Address:

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

Principal Office Address:

13200 International Airport Blvd  
Jacksonville, FL 32218

Mailing Address:

454 Price Street  
Savannah, GA 31401

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:

Jitendra Dave

Name

8601 Beach Blvd., #112

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

Jacksonville

FL

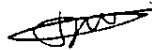
32215

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)

2016 NOV 14 PM 4:00  
CLERK OF COURT  
CLABASE

**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:**

Gaurav Patel

454 Price Street

Savannah, GA 31401

AMBR

Sam Patel

AMBR

Gaurang C. Patel

(Use attachment if necessary)

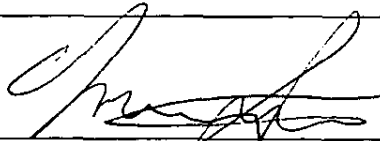
**ARTICLE V:** Effective date, if other than the date of filing: 11/9/16. (OPTIONAL)

(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.

Gaurav Patel

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)**

RECEIVED  
NOV 14 4:00 PM  
CLERK OF THE COURT  
JUDICIAL CIRCUIT IN AND FOR  
THE NINTH JUDICIAL CIRCUIT  
TALLAHASSEE, FLORIDA



MATTHEW COOPER WEINER

14 EAST STATE STREET  
SAVANNAH, GA 31401

P.O. BOX 10105  
SAVANNAH, GA 31412-1105

PHONE 912 233 9551

FAX 912 233 5464

EMAIL [mcooper@wsbg.com](mailto:mcooper@wsbg.com)

November 10, 2016

**VIA CERTIFIED MAIL RETURN RECEIPT REQUESTED**

New Filing Section  
Division of Corporations  
Florida Department of State  
P.O. Box 6327  
Tallahassee, FL 32314

Re: Rising Sun Hospitality, LLC Articles of Incorporation

Dear Sir or Madam:

Enclosed please find a cover page, Articles of Organization, and check in the amount of \$125.00 for the filing of the Articles of Organization for Rising Sun Hospitality, L.L.C. Kindly file the Articles of Organizations and return the acknowledgement to me in the self-addressed stamped enveloped enclosed herein. Thank you for your attention to this matter.

Very truly yours,

Tammra Kristoff,

Legal Assistant to Matthew C. Weiner

/tdk

Enclosures