# 4/60002/5732

(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	
(Business Entity Name)	i
(Document Number)	
Certified Copies Certificates of Status	
Special Instructions to Filing Officer:	i
MAILED IN TO SECRETA	ar)

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SECRETARY OF THE STATE OF THE SECRETARY OF THE SECRETARY

W16-078493

× 11/30/16

# COVER LETTER

	egistration Section ivision of Corporations		
SUBJECT	PASHMAK PROPERTIES LLC.		
SOBJECT	Name of	Limited Liabil	ity Company
The enclos	sed Articles of Organization and fee(	s) are submitted	for filing.
Please retu	urn all correspondence concerning thi	s matter to the f	following:
	Hossein Makhzan		
		Name of	Person
		Firm/Co	трапу
	116 Springhurst Circle		
		Addr	ess
	Lake Mary, FL 32746		
	hmakhzan@gmail.com	City/State an	d Zip Code
	E-mail address: (to be	used for future	annual report notification)
For further	information concerning this matter, p	lease call:	
	Hossein Makhzan	407 t (	222-2959
	Name of Person	· · — — — — — — — — — — — — — — — — — —	Daytime Telephone Number
Enclosed	is a check for the following amount:		
\$125.00 F	Filing Fee S130.00 Filing Fee Certificate of Statu	s Lucertif	00 Filing Fee & \$160.00 Filing Fee, lied Copy 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

ARTICI	LE I -	Nan	ıe:
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The name of the Limited Liability Company is:

### PASHMAK PROPERTIES 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:**

Mailing Address:

116 Springhurst Circle	146 CLEAR LAKE	146 Springhurst Circle
Lake Mary, FL 32746	Cr.	Lake Mary, PL 32746
	CANFORD 3277.	3

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:

Hossein Makhzan

Name

116 Springhurst Circle

146 CLEAR CAK

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

22773

Lake Mary

FL

22746

City State

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 statues 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

2016 NOV 30 PH 2: 15

ON STATE OF CORRESPONDED AND STATE OF CORRES

	Title:	Name and Address:
	"AMBR" = Authorized Member	
	"MGR" = Manager	
	AMBR	Hossein Makhzan
		116 Springhurst Circle Lake Mary, FL 32746
		Lake Mary, FL 32746
	MGR	Hossein Makhzan
		116 Springhurst Circle
		Lake Mary, FL 32746
	(I las attaches and If a service and	
	(Use attachment if necessary)	
ARTI	•	the date of filing: Japarens 1 - 2017. (OPTIONAL)
	CLEV: Effective date, if other than	the date of filing: Lanusery 1, 2017.  (OPTIONAL)  st be specific and cannot be more than five business days prior to at 90 days ofter.
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Filing Fees:

Typed or printed name of signee

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

. ARTICLE IV-

\$ 5.00 Certificate of Status (Optional)

Hossein Makhzan

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