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· (Re	equestor's Name)	
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PICK-UP	WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

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DEPARTMENT OF STATE

C. GOLDEN

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### **WALK IN**

PICK UP:

12/13 Glinda

XX	CERTIFIED COPY	
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	cus	
СХ	FILING LLC	
	EVDOL GROUP LLC	
(C	CORPORATE NAME AND DOCUMENT #)	
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#### **COVER LETTER**

TO: Registration Section Division of Corporations
SUBJECT: Devdol Group 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:
Mackenzie Hart
Name of Person
Registered Agent Solutions, Inc.
Firm/Company
1701 Directors Blvd, Ste 300
Address
Austin, TX 78744
City/State and Zip Code
Orders@rasi.com  E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Mackenzie Hart "888 705-7274
Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
S125.00 Filing Fee \$\ \text{Certificate of Status} \text{S155.00 Filing Fee & Certified Copy (additional copy is enclosed)} \ \text{S160.00 Filing Fee, Certified Copy (additional copy is enclosed)} \text{Certified Copy (additional copy is enclosed)} \text{Certified Copy (additional copy is enclosed)}
Mailing Address Registration Section  Street/Courier Address Registration Section
Division of Corporations Division of Corporations
P.O. Box 6327 Clifton Building Tallahassee, FL 32314 2661 Executive Center Circle

Tallahassee, FL 32301

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SECRETARY OF STORE
SECRETARY OF STORE



#### FLORIDA DEPARTMENT OF STATE Division of Corporations

FILED

2016 DEC 16 PH 3: 46

SECRETARY OF STATE TALLAHASSEE, FLORIDA

December 14, 2016

CORPORATE ACCESS, INC.

SUBJECT: DEVDOL GROUP LLC Ref. Number: W16000083710

DEPARTMENT OF SAME

We have received your document for DEVDOL GROUP LLC and your check(s) totaling \$155.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Effective January 1, 2014, all limited liability company forms must be submitted in accordance with the Revised Limited Liability Company Act, Chapter 605, Florida Statutes.

If your business entity does not intend to transact business until January 1st of the upcoming calendar year, you may wish to revise your document to include an effective date of January 1st. If you do not list an effective date of January 1st, your business entity will become effective this calendar year and it will be required to file an annual report and pay the required annual report fee for the upcoming calendar year this coming January, which is merely weeks away. By listing an effective date of January 1st, the entity's existence will not begin until January 1st of the upcoming year and will, therefore, postpone the entity's requirement to file an annual report and pay the required annual report filing fee until the following calendar year.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Jessica A Fason Regulatory Specialist II

Letter Number: 716A00026639

Corrected

## FILED

#### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

2016 DEC 16 PH 3: 46

SECRETARY OF STATE TALLAHASSET, FLORIDA

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The name of the Limited Liability Company is:

Devdol Group 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:
207 Crestwood Ln	207 Crestwood Ln
Largo, FL 33770	Largo, FL 33770
	egistered Office, & Registered Agent's Signature: ot serve as its own Registered Agent. You must designate an individual or Florida registration.)
The name and the Florida street address	ss of the registered agent are:
Divyang Patel	

Divyang Patel	
	Name
207 Crestwood Ln	
Florida street address (P	O. Box NOT acceptable)
Largo	FL 33770
City	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

<u>Title:</u>	Name and Address:
"AMBR" = Authorized Member	
"MGR" = Manager	
AMBR	Jyoti Patel
	207 Crestwood Ln
	Largo, FL 33770
AMBR	Divyang Patel
	207 Crestwood Ln
	Largo, FL 33770
E V: Effective date, if other than the date ctive date is listed, the date must be sp	e of filing:
(Use attachment if necessary)  EV: Effective date, if other than the date ective date is listed, the date must be spot filling.)  EVI: Other provisions, if any.	e of filing:
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E V: Effective date, if other than the date ctive date is listed, the date must be sp f filing.)  E VI: Other provisions, if any.	c of filing: (OPTIONAL)  pecific and cannot be more than five business days prior to or 90
E V: Effective date, if other than the date ctive date is listed, the date must be sp filling.)  E VI: Other provisions, if any.  REQUIRED SIGNATURE:  Signature of a m  (In accordance with section constitutes an affirmation of a management of a managemen	ember or an authorized representative of a member. 605.0203 (1) (b), Florida Statutes, the execution of this document under the penalties of perjury that the facts stated herein are true. nformation submitted in a document to the Department of State relief on a provided for in s.817.155, F.S.)
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ARTICLE IV-

Page 2 of 2

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