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PICK-UP WAIT MAIL					
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SECRETAR) OF STATE
(ALLAHASSEE, FLORID

COVER LETTER

	New Filing Section Division of Corporations			
SUBJEC	Wheels "R" Us (2017) LLC			
SOBJEC	Name of I	Limited Liabil	ity Company	
The enclo	osed Articles of Organization and fee(s)	are submitted	for filing.	
Please re	turn all correspondence concerning this	matter to the	following:	
	Mohani Jaikaran			
		Name of	`Person	
	Wheels "R" US (2017) LLC			
		Firm/Co	mpany	
	14825 US HWY. 19 Unit B			
		Addr	ess	
	Hudson Florida 34667			
		City/State an	•	
	BOD BOOT UBS @ Ti	SIAGM F	Ay, RR. Co.	Λ
	E-mail address: (to be us	sed for future a	innual report notificat	10n)
For further	information concerning this matter, ple	ase call:		
	Mohani Jaikaran	727	863-0424	
	Name of Person	Area Code	Daytime Telephor	ne Number
Enclosed	is a check for the following amount:			
] \$125.00	Filing Fee \$\frac{1}{2}\$130.00 Filing Fee & Certificate of Status	Certifi	00 Filing Fee & ed Copy al 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 Corporat Clifton Building 2661 Executive Cent Tallahassee, FL 3230	er Circle

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

Wheels "R" Us		<u> </u>		
(Mus	t contain the words "Limited Liability	Company, "I	L.C.," or "LLC.")	
ARTICLE II - Address:				
The mailing address and st	reet address of the principal office of	ne Limited Li	iability Company is:	
<u>Pr</u>	Principal Office Address:		Mailing Address:	
14925 HC Uwa	. 19 Unit B, Hudson Florida 34667	14825	US Hwy. 19 Unit B Hudson Florida	
14023 US FIW)	- 17 Cill B, Tiudon I Torida 5 1001			
14023 US HWY				
ARTICLE III - Registere	d Agent, Registered Office, & Regi			
ARTICLE III - Registere The Limited Liability Con	d Agent, Registered Office, & Regingany cannot serve as its own Register			
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ARTICLE III - Registere The Limited Liability Corunother business entity with	d Agent, Registered Office, & Regingany cannot serve as its own Registen han active Florida registration.)	ed Agent. Yo		
ARTICLE III - Registere The Limited Liability Corunother business entity with	d Agent, Registered Office, & Reginpany cannot serve as its own Register han active Florida registration.)	ed Agent. Yo		
ARTICLE III - Registere The Limited Liability Corunother business entity with	d Agent, Registered Office, & Reginpany cannot serve as its own Registe han active Florida registration.) street address of the registered agent and Mohani Jaikaran	ed Agent. Yo		
ARTICLE III - Registere The Limited Liability Corunother business entity with	d Agent, Registered Office, & Reginpany cannot serve as its own Register han active Florida registration.) street address of the registered agent a Mohani Jaikaran	ed Agent. Yo	ou must designate an individual or	
ARTICLE III - Registere The Limited Liability Corunother business entity with	d Agent, Registered Office, & Reginpany cannot serve as its own Register han active Florida registration.) street address of the registered agent a Mohani Jaikaran Name 14825 US Hwy. 19 Unit B Florida street address (P.O.	ed Agent. Yo	ou must designate an individual or	

dIam familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S..

(CONTINUED)

Registered Agent's Signature (REQUIRED)

ARTICLE IV-

The name and address of each person authorized to manage and control the Limited Liability Company:

<u>Title:</u> "AMBR" = Authorized Member	Name and Address:
"MGR" = Manager MGR	Mohani Jaikaran
	14825 US Hwy. 19 Unit B Hudson Florida 34667
MGR	Raj Jaikaran
	14825 US Hwy. 19 Unit B Hudson Florida 34667
MGR	Randy Jaikaran
	14825 Us Hwy. 19 Unit B Hudson Florida 34667
(Use attachment if necessary)	
TICLE V: Effective date, if other than the date of filing:	(OPTIONAL)
date of filing.)	cannot be more than five business days prior to or 90 days aft
ote: If the date inserted in this block does not meet the a comment's effective date on the Department of State's	pplicable statutory filing requirements, this date will not be listed records.
RTICLE 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.

Mohani Jaikaran

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)