

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H19000117265 3)))
H190001172653ABC%

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:
 Division of Corporations
 Fax Number : (850)617-6381

From:
 Account Name : ASMA & ASMA, P.A.
 Account Number : 120060000067
 Phone : (407)656-5750
 Fax Number : (407)656-0486

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: lana Kila 50@ gmail-com

FLORIDA LIMITED LIABILITY CO. LANAKILAS, I.LC

Certificate of Status	0
Certified Copy	0
Page Count	05
Estimated Charge	\$125.00

Electronic Filing Menu

 Γ

 σ

Corporate Filing Menu

Help C Kinser

ARTICLES OF ORGANIZATION

OF

LANAKILAS, LLC

19 APR -9 AN \$ 2

The undersigned certifies that the members described herein have associated themselves for the purpose of becoming a limited liability company under the laws of the State of Florida, providing for the formation, rights, privileges, and immunities of limited liability companies for profit. The undersigned further declares that the following Articles shall serve as the Charter and authority for the conduct of business of the limited liability company.

ARTICLE I NAME AND PRINCIPAL PLACE OF BUSINESS

The name of the limited liability company shall be LANAKILAS, LLC and its principal office shall be located at 12407 Sion Ct. Orlando Flerida 32824. The mailing address of the entity shall be P.O. Box 770162 Orlando Florida 32877-0162. The entity shall have the power and authority to establish branch offices at any other place or places as the members may designate.

ARTICLE II PURPOSES AND POWERS

In addition to the powers authorized by the laws of the State of Florida for limited liability companies, the general nature of the businesses to be transacted, and which the limited liability company is authorized to transact, shall be as follows:

- 1. To engage in any activity or business authorized under the Florida Statutes.
- 2. In general, to carry on any and all incidental business; to have and exercise all the powers conferred by the laws of the State of Florida, and to do any and all things set forth in these Articles to the same extent as a natural person might or could do.
- 3. To purchase or otherwise acquire, undertake, carry on, improve, or develop, all or any of the business, good will, rights, assets, and liabilities of any person, firm, association, or corporation carrying on any kind of business of a similar nature to that which this limited liability company is authorized to carry on, pursuant to provisions of these Articles; and to hold,

utilize, and in any manner dispose of the rights and property so acquired.

- 4. To enter into and make all necessary contracts for its business with foreign, or of any domestic or foreign state, government, or governmental authority, or of any political or administrative subdivision, or department, and to perform and carry out, assign, cancel, or rescind any of such contracts.
- 5. To exercise all or any of the limited liability company powers, and to carry out all or any of the purposes, enumerated in these Articles and otherwise granted or permitted by law, while acting as agent, nominee, or attorney-in-fact for any persons or corporations, and perform any service under contract or otherwise for any corporation, association, partnership, firm, syndicate, individual, or other entity, and in this capacity or under this arrangement develop, improve, stabilize, strengthen, or extend the property and commercial interest of the property and to aid, assist, or participate in any lawful enterprise in connection with or incidental to the agency, representation, or service, and to render any other service or assistance it may lawfully do under the laws of the State of Florida, providing for the formation, rights, privileges, and immunities of limited liability companies for profit.
- 6. To do everything necessary, proper, advisable, or convenient for the accomplishment of any purposes, or the attainment of any of the objects, or the furtherance of any of the powers set forth in these Articles, either alone or in association with others incidental or pertaining to, or going out of, or connected with its business or powers, provided the same shall not be inconsistent with the laws of the State of Florida.

The several clauses contained in this statement of the general nature of the business or businesses to be transacted shall be construed as both purposes and powers of this limited liability company, and statements contained in each clause shall, except as otherwise expressed, be in no way limited or restricted by reference to or inference form the terms of any other clause. They shall be regarded as independent purposes and powers.

Nothing contained in these Articles shall be deemed or construed as authorizing or permitting, or purporting to authorize or permit the limited liability company to carry on any business, exercise any power, or do any act which a limited liability company may not, under Florida laws, lawfully carry on, exercise, or do.

ARTICLE III EXERCISE OF POWERS

All limited liability company powers shall be exercised by or under the authority of, and the business and affairs of this limited liability company shall be managed under the direction of, the members of this limited liability company. This Article may be amended from time to time in the regulations of the limited liability company by a unanimous vote of the members of the limited liability company.

ARTICLE IV MANAGEMENT

This limited liability company shall be initially managed by its members. The name and address of the initial member is:

Riani H. P. Pokipala 12407 Sion Ct. Orlando Florida 32824

ARTICLE V MEMBERSHIP RESTRICTIONS

Members shall have the right to admit new members by unanimous consent. Contributions required of new members shall be determined as of the time of admission to the limited liability company. A member's interest in the limited liability company may not be sold or otherwise transferred except with unanimous written consent of all members.

On the death, retirement, resignation, expulsion, bankruptcy, or dissolution of a member, or the occurrence of any other event that terminates the continued membership of a member in the limited liability company, the remaining members shall have the right to continue the business on unanimous consent of the remaining members.

ARTICLE VI INITIAL REGISTERED OFFICE AND REGISTERED AGENT

The address of the initial registered office of the limited liability company is 12407 Sion Ct. Orlando Florida 32824 and the name of the company's initial registered agent at that address is Riani H. P. Pokipala.

The undersigned	certifies	that	this	instrument	constitutes	the	proposed	Articles	۸f
Organization of the above-named limited liability company.									
	,			iney contigual	١٦٠				

this day of, 2019.	ı, FL 347	87 on	
Incorporatory			
	· <u>* </u>	19	
C. Nick Asma, Esquire Asma & Asma, P.A.	15 10	נ <u>ז</u> •כני	
Asina & Asina, F.A.	- Z		
	S(.)	9	
	7	Э т>-	
STATE OF FLORIDA		3	
COUNTY OF ORANGE	0 5	Ç.	i
	海流	€ 0	
BEFORE ME, the undersigned authority, personally appeared C. Nick As	ma perso	naliv	
known to me or who produced as identification and	who exe	cuted	
the foregoing Articles of Organization, and he acknowledged that he subscinstrument for the uses and purposes set forth herein.	ribed the	said	
WITNESS my hand and official seal in the County and State aforesaid this of Pril 2019. Notary Public State of Florids Sharon D Morgan My Commission FF 970008 With Public State of Florids Sharon D Morgan My Commission FF 970008	s <u>9</u>	_ day	
CONTROL CONTRO			
77 4 1 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5			

Having been named as Registered Agent for the above stated Organization and to accept service of process at the place designated in these Articles, 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.

Riani H. P. Pokipala 12407 Sion Ct.

Orlando Florida 32824

* See afterhonat for yestery and putting contification.

Date: 2/15/19

State of Hawaii	
Country of Handulu	
On Felguary IC, adj before me,	Garyyn Carondang
Rious H.D. Dakin I.	There insert name of notary)
	name(s) of Signer(s))
personally known to me (or proved to me on the basis name(s) is/are subscribed to the within instrument and ac in his/her/their authorized capacity(ies), and that by his or the entity upon behalf of which the person(s) acted, expressing the state of th	knowledged to me that he/she/they executed the same her/their signature(s) on the instrument the person(s)
Signature (SEAL) GRYLYN A CARANDANG My Commission Expires: My Commission Expires: 11/05/2021	NOTARY OF HAVE
NOTA DV DUDI 10 0	This area for Official Notarial Seal
NOTARY PUBLIC C	u
Doc. Date: toloruan 15, 201	# Pages:
Notary Name: Omin Olivandally	Judicial Circuit: Tivet
Doc. Description: Akylowedgement of Ria	hi H.P.
tokitala	MOTARY OF THE PUBLIC *
Notary Signature: Date: ' 2 5 17	OF HAWAII

ALL PURPOSE ACKNOWLEDGMENT