Alordia Dipartment Division of corpora Electrical line over

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.

(((#20000354775 3)))



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

To:

Division of Corporations

Fax Number

: (850)617-6381

From:

: EXPRESS CORPORATE FILING SERVICE INC. Account Name

Account Number : 110000000146 Phone

: (305)444-4994

Fax Number

: (305)444-4977

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

Email Address:

FLORIDA HIMITED LIABILITY CO.

NIRVANA ROOM LLC

Certificate o	Stat	ıs	Ü
Certified Co	у		1
Page Count			04
Estimated C	arge		\$155.00

Electronic Filing Menu

Corporate Filing Menu

Help

*Articles of Organization

State of Florida Limited Liabilia: Company Pursuant to Section 605.0201, Fla. Stat.:

Article I - NAME

The name of the Limited Liability Company is as follows: NIRVANA ROOM LLC

Article II - TYPE

The entity being formed is a Limited Liability Company.

Article III - ADDRESS

The street address (principal office address) for the Limited Liability Company are as follows:

Limited Liability Company Address:

883 EAST PALMETO PARKIROAD BOCA RATON, FL 33432

The mailing address for the limited liability company are the same.

Article IV - REGISTERED AGENT INFORMATION

The name and address of the registered agent are as follows:

Shaban Malik

3408 W 84th Street Suite 106 Hialeah, FL 33018

The street address and the malling address of the registered agent are the same.

Having been named as registered agent and to accept service of process for the above stated limited liability dompany at the place designated in this certificate, I. Shaban Malik, hereby accept the appointment as registered agent and consent 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 of the Florida Statutes.

Signature of Registered Agent

Carp Mai

Article V - STRUCTURE

This limited liability will have the following members and be member-managed:

VANIT LUTHRA

883 EAST PALMETO PARK ROAD BOCA RATON, FL 33-32

Member-Manager

KARANPREET KAUR

883 EAST PALMETO PARK ROAD

BOCA RATON, FL 33-32

Manager

Article VI - EFFECTIVE DATE

The effective date of these Articles of Organization will be the date this document is filed with the Florida Division of Corporations.

EXECUTION

Signature of organizer:

13053284774 From: Yanet Avila

Aut Me

Printed name of organizer:

SHABAN MALIK

Title of organizer:

CPA

Statement of signatory:

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 trird-degree felony as provided for in s.817.155, F.S.

2020 OCT 12 PH 5: 02