

L23000233862

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

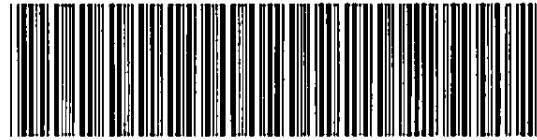
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MAY 12 2023

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2023 MAY 12 AM 9:40
SOUTH FLORIDA

05/12/2023 09:40:00 +\$125.00

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2023 MAY 12 AM 9:27
SOUTH FLORIDA

COVER LETTER

**TO: New Filing Section
Division of Corporations**

SUBJECT: SUNSHINE ESTATE PROPERTIES 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:

DHAVALKUMAR G. PATEL

Name of Person

Firm/Company

2345 8TH ST NW

Address

WINTER HAVEN, FL 33881

City/State and Zip Code

Chin10patel@yahoo.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

MANTHAN DHARIA

732

689-0063

at (_____) _____

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

☒ \$125.00 Filing Fee

☐ \$130.00 Filing Fee &
Certificate of Status

☐ \$155.00 Filing Fee &
Certified Copy
(additional 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
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

SUNSHINE ESTATE PROPERTIES LLC

(Must contain 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:

2345 8TH ST NW

WINTER HAVEN, FL 33881

USA

Mailing Address:

2345 8TH ST NW

WINTER HAVEN, FL 33881

USA

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:

DHAVALKUMAR G. PATEL

Name

2345 8TH ST NW

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

WINTER HAVEN

City

FL

State

33881

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)

2023 MAY 12 AM 9:40

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ARTICLE IV-

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

Title:

Name and Address:

"AMBR" = Authorized Member

"MGR" = Manager

AMBR # 1

DHAVALKUMAR G. PATEL
2345 8TH ST NW
WINTER HAVEN, FL 33881

AMBR # 2

MANTHAN DHARIA
711 MARGARET CT
SOUTH PLAINFIELD, NJ 07080

AMBR # 3

DARSHAN PATEL
717 STONY BROOK WAY
NORTH BRUNSWICK, NJ 08902

AMBR # 4

RAHUL SINGH
108 ORION ROAD
PISCATAWAY, NJ 08854

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: 03/24/2023 (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

ARTICLE VI: Other provisions, if any.

REQUIRED SIGNATURE:

DHAVA Patel

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.

DHAVALKUMAR G. PATEL

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)

AMBR # 5

NAME: JOLLY PATEL
ADDRESS: 37 VOCISANO COURT
PISCATAWAY, NEW JERSEY 08854

AMBR # 6

NAME: NAIMISH PATEL
ADDRESS: 28 BECH WOOD DRIVE
ROBBINSVILLE, NEW JERSEY 08691

AMBR # 7

NAME: ASEEM THUKRAL
ADDRESS: 8 BEL AIR CT
MILLTOWN, NJ 08850

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SECURITY