# L24000 142235

(Requestor's Name)
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## CORPORATE ACCESS, \_\_\_\_

When you need ACCESS to the world

INC.

236 East 6th Avenue. Tallahassee, Florida 32303 P.O. Box 37066 (32315-7066) ~ (850) 222-2666 or (800) 969-1666. Fax (850) 222-1666

### **WALK IN**

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#### **COVER LETTER**

eun inzer.	ges i	Pinnacle Circle, LLC	
SUBJECT:		ted Liability Company	
The enclosed Articles of	Organization and fee(s) are	submitted for filing.	
Please return all correspo	ondence concerning this ma	tter to the following:	
		Tiffany Noel	
		Name of Person	
	Ni	shad Khan, P.L.	
		Firm/Company	
	1303	N. Orange Avenue	
<del></del>		Address	
	Orlai	ndo, Florida 32804	
	C	ty/State and Zip Code	
	Tiffany@	NishadKhanLaw.com	<del> </del>
For further information c	concerning this matter, pleas	•	
	any Noel	at ( 407 ) 2: Area Code & Daytime Telep	28-9711
Name o	of Person	Area Code & Daytime Telep	28-9711 2024 HAR 27
Enclosed is a check for	r the following amount:		(27)
S125.00 Filing Fee [	\$130.00 Filing Fee & Certificate of Status	S155.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$160.00 Filing Fee. Certificate of Status & Certified Gapy (additional copy)'s enclosed)
	Mailing Address	Street/Courier Address	

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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

ARTICLE I - Nam The name of the Lir	e: nited Liability Compa	any is:	
(Mus	968 Pinnac	cle Circle, LLC ad Liability Company," "L.L.C.," or "LLC	C.")
ARTICLE II - Add The mailing address		the principal office of the Lim	ited Liability Company is:
Principal Office Ac	<u>ldress:</u>	Mailing Address:	
1303 N Orange Av Orlando, FL 32804		1303 N Orange Ave Orlando, FL 32804	
(The Limited Liability Corbusiness entity with an ac	npany cannot serve as its own tive Florida registration.)	stered Office, & Registered And Registered Agent. You must designate of the registered agent are:	
_	Nisha	ad Khan, P.L.	
		Name	
	1303 N	N. Orange Ave	
- -	Florida street addres	ss (P.O. Box NOT acceptable)	(c
	Orlando, FL 328	804 <sub>FL</sub>	<b>202</b> 1
•		State, and Zip	
liability compan registered agent and statutes relating to	v at the place designate d agree to act in this ca o the proper and compl	nd to accept service of process f ed in this certificate, I hereby ac apacity. I further agree to comp lete performance of my duties, a is registered agent as provided fo	rcept the appointment as ly with the provisions of all and I am familiar with and

(CONTINUED)

#### Page 1 of 2

#### ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

Title:		Name and Address:	
"MGR" = Mana "MGRM" = Ma			
Manager		Bashir Khan	
		1303 N Orange Ave	
		Orlando, FL 32804	<del></del>
Manager		Haseeba Khan	
		1303 N Orange Ave	
		Orlando, FL 32804	
		<del></del>	
<u> </u>			
(Use attachment	if necessary)		
	• •	date of filing:	OPTIONAL)
LE V: Effective	date, if other than the	date of filing: (especific and cannot be more than five bu	(OPTIONAL)
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Page 2 of 2

\$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)