124000 365017

	Requestor's Name)	
(.	Address)	
	Address)	
	City/State/Zip/Phone #)	
PICK-UP	☐ WAIT	MAIL
	Business Entity Name)	
(Document Number)	
Certified Copies	_ Certificates of	Status
Special Instructions to F	Filing Officer:	

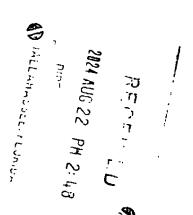
Office Use Only



100434529851

2024 AUG 23F AM 9: 47
SECRETARY OF STATE
TALLAHASSEE, FI

TITO



CORPORATE ACCESS,

When you need ACCESS to the world

INC.

236 Fast 6th Avenue. Tallahassee, Florida 32303

P.O. Box 37066 (32315-7066) (850) 222-2666 or (800) 969-1666. Fax (850) 222-1666

WALK IN

	PICK U	P: BROOK 8/22		
	CERTIFIED COPY			
XX	РНОТОСОРУ			
	GS		© 2	
XX	FILING	ILC	024 AL	
1.	AMANI LAXMI LLC		2024 AUG 23 Sechetar Tallaha	
2.	(CORPORATE NAME AND DOCUME	(NT #)	JG 23 AM 9: 47 TARE OF STATE AHASSEE, FL	
	(CORPORATE NAME AND DOCUME	[NT #)		
3.				
	(CORPORATE NAME AND DOCUME	'NT #)		
4.	(CORPORATE NAME AND DOCUME	NT#)		
5.	(CORPORATE NAME AND DOCUME	'X"I' #\		
C	Very Martin Wash. April 1707e (1811)			
6.	(CORPORATE NAME AND DOCUMI	NT#)		
SPECIAI	L INSTRUCTIONS:			
				

ARTICLES OF ORGANIZATION FOR AMANI LAXMI LLC

The undersigned Organizer, desiring to form a limited liability company pursuant to the provisions of the Florida Revised Limited Liability Company Act (the "Act"), hereby submits, and files with the Florida Department of State, the following Articles of Organization.

ARTICLE I — NAME:

The name of the Limited Liability Company shall be: AMANI LAXMI LLC (the "Company").

ARTICLE II — ADDRESS:

The mailing address and street address of the principal office of the Company shall be as follows:

1506 Sammonds Road Plant City, FL 33563

ARTICLE III — REGISTERED AGENT AND REGISTERED OFFICI

The address of the initial registered office of the Company in the State of Florida is 1506 Sammonds Road, Plant City, Florida 33563, and the name of the registered agent at such address Twinkleben H. Patel.

ARTICLE IV – MANAGEMENT:

The Company shall be managed by one or more Managers. The names and addresses of the initial Manager(s) are:

Twinkleben H. Patel 14831 Greene Acres Loop Dover, FL 33527

Organization this 22nd day of August, 2024. In accordance with Section 605.0201 of the Act, the execution of these Articles of Organization constitutes an affirmation under the penalties of perjury that the facts stated herein are true.

Twinkleben H. Patel, Organizer

CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of Sections 605.0113, Florida Statutes, the undersigned Limited Liability Company, organized under the laws of the State of Florida, submits the following statement in designating the registered office/registered agent, in the State of Florida:

1.	The name of the company is:			
	AMANI LAXMI LLC	SEC.	2024 AUG	
2.	The name and address of the registered agent and office is:	AL TAB	AUG 23	T
	Twinkleben H. Patel 1506 Sammonds Road Plant City, FL 33563 Twinkleben H. Patel, Organizer	ASSEE, FL	3 AM 9: 47	
	Area 02 00211			

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.

Twinkleben H. Patel

Aug 22, 2024