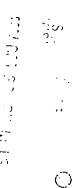


(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:





10/30/24--01029--016 **125.00



COVER LETTER

	New Filing Sec Division of Co				
SUBJEC		ipment LLC			
SUBJEC	·	Name of L	imited Liabil	ity Company	
The enclo	sed Articles of	Organization and fee(s)	are submitted	for filing.	
Please ret	urn all corresp	ondence concerning this r	natter to the (following:	
	Manish Gup	ota			
			Name of	Person	· ·
			Firm/Co	mpany	
	260 SE 11th	St			
			Addr	ess	
	Pompano Bo	each FL 33060			
	manguptal@		City/State an	d Zip Code	
		E-mail address: (to be use	ed for future a	nnual report notificat	ion)
For further	information co	oncerning this matter, plea	ise call:		
	Manish Gupt		646	468 4799)	
	Nam	ne of Person	Area Code	Daytime Telephor	ne Number
Enclosed	is a check for t	he following amount:			
■\$125.0	0 Filing Fee	□\$130.00 Filing Fee of Certificate of Status	Certifi	5.00 Filing Fee & ed Copy al copy is enclosed)	☐\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed
	<u>Ma</u> ili <u>r</u>	n <u>g Address</u>		Street Address	

New Filing Section
Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

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:

ARTICLE II - Address:	t contain the words "Limited I	· · · · · · · · · · · · · · · · · · ·	,	
	reet address of the principal of	fice of the Limited	Liability Company is:	
<u>Pr</u>	Principal Office Address:		Mailing Address:	
260 SE 11th St	260 SE 11th St., Pompano Beach FL 33060		260 SE 11th St., Pompano Beach FL 33060	
			•	
The Limited Liability Cornother business entity wi	th an active Florida registration	Registered Agent. V	nt's Signature: You must designate an individu	al or
The Limited Liability Cornother business entity wi	npany cannot serve as its own	Registered Agent. V		al or
The Limited Liability Cornother business entity wi	npany cannot serve as its own th an active Florida registration street address of the registered Manish Gupta	Registered Agent. \ n.) agent are:		al or
The Limited Liability Cornother business entity wi	npany cannot serve as its own th an active Florida registration street address of the registered	Registered Agent. \n.) agent are: Name	You must designate an individu	al or
The Limited Liability Cornother business entity wi	npany cannot serve as its own th an active Florida registration street address of the registered Manish Gupta 260 SE 11th St	Registered Agent. \n.) agent are: Name	You must designate an individu	al or

(CONTINUED)

Registered Agent's Signature (REQUIRED)

ARTICLE IV-

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

"AMBR" = Authorized Member "MGR" = Manager			
With - Manager			
AMBR	Manish Gupta 260 SE 11th St., Pompano Beach FL 33060	-	
	260 SE 11th St., Pompano Beach FL 33060	-	
		-	
4.3.473.53	V. Salan Cons		
AMBR	Karieshma Sarnaa 260 SE 11th St., Pompano Beach FL 33060	-	
		-	
•		-	
		-	
		-	
		_	
		-	
(Use attachment if necessary)			
	e of filing: (OPTIONAL)		
If the date inserted in this block does not cument's effective date on the Departmen	meet the applicable statutory filing requirements, this date will not tof State's records.	be lis	ted
cument's effective date on the Departmen		be lis	ted
cument's effective date on the Departmen		be lis	ited
cument's effective date on the Departmen		be lis	ited
CLE VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a π	t of State's records.	be lis	ited
REOURED SIGNATURE: Signature of a m This document is exect	nember or an authorized representative of a member. uted in accordance with section 605.0203 (1) (b), Florida Statutes.	be lis	ited
REOUIRED SIGNATURE: Signature of a m This document is exect I am aware that any false	nember or an authorized representative of a member. uted in accordance with section 605.0203 (1) (b), Florida Statutes, see information submitted in a document to the Department of State	be lis	
REOUIRED SIGNATURE: Signature of a m This document is executed a management of the second constitutes a third degree	nember or an authorized representative of a member. uted in accordance with section 605.0203 (1) (b), Florida Statutes.		eted
REQUIRED SIGNATURE: Signature of a m This document is exect 1 am aware that any false	nember or an authorized representative of a member. uted in accordance with section 605.0203 (1) (b), Florida Statutes, se information submitted in a document to the Department of State see felony as provided for in s.817.155, F.S.		
REOURED SIGNATURE: Signature of a m This document is executed a management of the second and the second constitutes a third degree.	nember or an authorized representative of a member. uted in accordance with section 605.0203 (1) (b), Florida Statutes, see information submitted in a document to the Department of State	be lis	
REOURED SIGNATURE: Signature of a m This document is exect I am aware that any false constitutes a third degree	nember or an authorized representative of a member. uted in accordance with section 605.0203 (1) (b), Florida Statutes, se information submitted in a document to the Department of State ee felony as provided for in s.817.155, F.S. Typed or printed name of signee		
REOURED SIGNATURE: Signature of a m This document is exect 1 am aware that any false constitutes a third degree. Manish Gupta	nember or an authorized representative of a member. uted in accordance with section 605.0203 (1) (b), Florida Statutes, se information submitted in a document to the Department of State ee felony as provided for in s.817.155, F.S. Typed or printed name of signee Filing Fees:		
REOURED SIGNATURE: Signature of a m This document is exect 1 am aware that any false constitutes a third degree. Manish Gupta	nember or an authorized representative of a member. uted in accordance with section 605.0203 (1) (b), Florida Statutes, se information submitted in a document to the Department of State ee felony as provided for in s.817.155, F.S. Typed or printed name of signee	.C.) 7346	
REOURED SIGNATURE: Signature of a m This document is exect 1 am aware that any false constitutes a third degree. Manish Gupta S125.00 Filing Fee for Articles of O	nember or an authorized representative of a member. uted in accordance with section 605.0203 (1) (b), Florida Statutes, se information submitted in a document to the Department of State ee felony as provided for in s.817.155, F.S. Typed or printed name of signee Filing Fees: rganization and Designation of Registered Agent	5.40) 7546	eted
REOUIRED SIGNATURE: Signature of a m This document is exect 1 am aware that any false constitutes a third degree Manish Gupta \$125.00 Filing Fee for Articles of O \$ 30.00 Certified Copy (Optional)	nember or an authorized representative of a member. uted in accordance with section 605.0203 (1) (b), Florida Statutes, se information submitted in a document to the Department of State ee felony as provided for in s.817.155, F.S. Typed or printed name of signee Filing Fees: rganization and Designation of Registered Agent	5.40) 7546	
REOURED SIGNATURE: Signature of a m This document is exect 1 am aware that any false constitutes a third degree Manish Gupta \$125.00 Filing Fee for Articles of O \$ 30.00 Certified Copy (Optional)	nember or an authorized representative of a member. uted in accordance with section 605.0203 (1) (b), Florida Statutes, se information submitted in a document to the Department of State ee felony as provided for in s.817.155, F.S. Typed or printed name of signee Filing Fees: rganization and Designation of Registered Agent	5.40) 7546	