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To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : DHRUV MANAGEMENT Account Number : I20170008032 Phone : (813)951-0222 Fax Number : (727)499-2716

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

Email Address: upatel@dhruvmanagement.com

FLORIDA LIMITED LIABILITY CO.

Fortune RVS Investment LLC

Certificate of Status	0
Certified Copy	()
Page Count	04
Estimated Charge	\$125.00

COVER LETTER

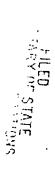
TO: New Filing S Division of C			
SUBJECT: Costume RVS (Westmant LLC		
	Name of Lim	nited Liability Corpany	
The enclosed Articles	of Organization and fee(s) are	e submitted for filing.	
Please return all corres	pondence concerning this ma	itter to the following:	
Utkaran Patet			
- C		Name of Pesch	
		FinCinpay	
6903 Cong	ress St		
		Addes	
New Port 1	Richey, FL, 34653		
	Ci	ity/State and Zip Cale	
upatel@druvami	- · · · · · · · · · · · · · · · · · · ·		
	E-mail address: (to be used	for future annual report notificat	ion)
For further information of	concerning this matter, please	call:	
Utkarsh Palet	at (727	943-9500	
No	nte of Person Ar	rea Code Daytime Telephon	e Number
Enclosed is a check for	the following amount:		
■\$125.00 Filing Fee	□S130.00 Filing Fee & Certificate of Status	I\$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐\$160.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is endired)

<u>MailingAddress</u>

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

MAR 31 AM St 52



ARTICLES OF ORGANIZATION FOR FLORIDA LEMITED HABILITY COMPANY.

Fert	une RVS Investment LLC	
	(Must contain the words "Limited Liabili	ty Company, "L.L.C.," or "LLC.")
ARTICLE II - The mailing ad	dress and street address of the principal office of	, , ,
690.	Principal Office Address: G Congress St. New Port Richey, FL 34653	Mailing Address: 6903 Congress St. New Port Richey, FL 34653

The name and the Florida street address of the registered agent are:

Vijay Patel		
	Mane	
6903 Congress St		
Florida street address (P.O. Box <u>NOT</u> a	icceptable)
New Port Richey	FL	34653
Clv	State	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 (NEQUINED)

(CONTINUED)

ARTICLE IV-

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

<u>Title:</u> "AMBR" = A	Name and Address: Authorized Member	
"MGR" = Mai		
AMBR		
<u> </u>	Vjiay jatel 6933 Congress St. New Fort Richey, FL 24653	
AMBR	Subhash Patel	
	6903 Congress St. New Port Richey, FL 34633	
· · · · · ·		
		
(Use attachme	ent if necessary)	
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