

PRESTICE HALL LUIZAL & FINANCIAL SERVICES	A CCOUNT	NO.	072100000032
LEGIAL A FINANCIAL SERVICES	WCCODIAT	NO. i	0/2100000022

REFERENCE: 973123 5018024

AUTHOR! ZATION :

COST LIMIT : \$ PPD

May 31, 1996 ORDER DATE :

ORDER TIME : 11:35 AM

ORDER NO. : 973123

5018024 CUSTOMER NO:

CUSTOMER: Mr. Mitch Berenson

BERNARD P. WOLFSDORF

17383 Sunset Blvd.

Ste. 120

Pacific Palisad, CA 90272

DOMESTIC FILING

\*\*\*\*285.00 \*\*\*\*285.00

DIVISION OF CORPORATION

NAME:

ATHARVA ENTERPRISES, L.C.

EFFECTIVE DATE:

ARTICLES OF INCORPORATION CERTIFICATE OF LIMITED PARTNERSHIP

LIMITED LIABILITY COMPANY

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY PLAIN STAMPED COPY CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Jennifer Moran

EXAMINER'S INITIALS:

### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 - Name:

The name of the Limited Liability Company is:

ATHARYA ENTERPRISES, L.C.

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company

2590 Atlantic Avenue Melbourne Beach, FL 32951

ARTICLE III - Duration:

The period of duration for the Limited Liability Company shall be:

December 31, 2071

ARTICLE IV - Management: (check and complete the appropriate statement)

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_	The Limited Liability Company	is to de manages i	DA II MENINERO O	INTRINSTELL SOL	trice intrincé(a)
_			•	4-5 file	
	and address(es) of such manager	rfal who is/are to (	sorve se militer	M(S) (SVACE:	
	TIM BRAILESNIES I DE SAMI IIMERETA	(a) with its era in i		- (- <i>)</i>	

The Limited Liability Company is to be managed by the members and the name(s) and address(es) of the managing member(s) is/ are:

Rajiv Shulla 2590 Atlantic Ave. Nelbourne Beach, Fl 32951 Kaushik Patel 2590 Atlantic Ave. Melbourne Brach, FL 32951

### ARTICLE V - Admission of Additional Members:

The right, if given, of the remaining members to admit additional members and the terms and conditions of the admissions shall be:

M/A

#### ARTICLE VI - Members Rights to Continue Business:

The right, if given, of the remaining members of the limited liability company to continue the business on the death, retirement, resignation, expulsion, bankruptcy, or dissolution of a member or the occurrence of any other event which terminates the continued membership of a member in the limited liability company shall be:

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NOTE: If no provisions are to be made in Artice V and VI remove this page before submitting for filing with the Department of State.

### CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

SECRETARY OF STATE

96 JUH-3 PH 3: 45

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, 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 limited liability company is:

ATMARYA ENTERPRISES, L.C.

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4. 110			11 Corpora					
	1201 Ha	ys Stree	t, Suite 1	(Ne DS x or Meil Dro				
	<u>Tallaha</u>	ssee, Fl	orida 323					
Having i	been nan lability c	ned as re ompany a	gistered ago It the place	nt and to designated	eccept se in this co	rvice of pri etificate, i	ocess for ti hereby acc	he above stated capt the appoint-

Filing Fee: \$ 35 for Designation of Registered Agent

ment 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

em familiar with and accept the obligations of my position as registered agent.

SECULTARY OF STATE OF STATE OF STATE

## AFFIDAVIT OF MEMBERSHIP AND CONTRIBUTIONS

	ATHANYA ENTERPRISES, L.C.	deposes and says
1) the above named limited lia	bility company has at least two members	
2) the total amount of cash co	ntributed by the member(s) is	\$ 100.00
<ol> <li>if any, the agreed value of p A description of the prope</li> </ol>	property other than cash contributed by member(s) is crty is attached and made a part hereto.	20.00
4) the amount of cash or prop	erty anticipated to be contributed by member(s) is	So <u>.co</u>
5) the total amount of 2, 3, ar	nd 4 is	\$ 100.000
	1. 2	

## 40000060

ACCOUNT NO. 072100000032 REFERENCE 351359 AUTHORIZATION COST LIMIT : \$ 52.50 ORDER DATE : May 1, 1997 ORDER TIME : 2:37 PM ORDER NO. : 351359-005 500002162645--7 CUSTOMER' NO: 4367996 CUSTOMER: Marshall C. Deason, Jr. Marshall Deason, Esq 3750 Gunn Highway Tampa, FL 33624 **DOMESTIC FILINGS** NAME: KOMAN, L.C. XX ARTICLES OF DISSOLUTION PLEASE RETURN THE FOLLOWING AS PROOF OF FILING: Ψ

CERTIFIED COPY PLAIN STAMPED COPY CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Todd Sterzoy

EXAMINER'S INITIALS:

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# Articles of Dissolution of KOMAN, L.C.

97 MAY - 1 PH 4: 29

SECRETARY OF STATE
TALLAHASSEE. FLORIDA

THE UNDERSIGNED, being all of the members of Koman, L.C., a Florida limited liability company, hereby file these articles of dissolution pursuant to Section 608.445 of the Florida Statutes and show:

- 1. The name of the limited liability company is Koman, L.C.
- 2. The effective date of these articles of dissolution shall be date of their filing with the Secretary of State of Florida.
- 3. The limited liability company is being dissolved pursuant to Section 608.441(1)(b) of the Florida Statutes by unanimous written agreement of all of the members of the limited liability company.
- 4. All debts, obligations, and liabilities of the limited liability company have been paid.
- 5. All remaining property and assets of the limited liability company after the payment of debts, obligations, and liabilities have been distributed among its members in accordance with their respective rights and interests.
- 6. There are no suits pending against the limited liability company in any court.

IN WITNESS WHEREOF, the undersigned members of Koman, L.C. have hereunto subscribed their names and thereby consented to the dissolution of said limited liability company, as of this 20th day of 1901.

STATE OF FLOQION
COUNTY OF PINELIAS

Sworn and subscribed to this 29th day of April 1997, by

Jerry Mann, who is personally known to me or who produced

DICINALS as identification and who did take an oath.

CHERYL L. KUNKEL Notary Public, State of Florida Notary Public, State of Florida Notary Public, State of Florida	Northry Public
Notary Public, State Notary Public, State No. CC586373 No. CC586373	Printed name of Notary
	Commission No
	Expires:
SWORN and subscribed to this a  Jeffery Kozial, who is person  121 Nevs Lung Je as	ally known to me or who produced identification and who did take an oath.
	Notary Public
Notary Public, State of Florida My comm. expires Bapt. 20, 2000 No. CC588373	Printed name of Notary  Commission No.
	Expires: