L 190000 4249 BHUSENDER PANCHAL. Requestor's Name 605 W BRD STREET DON ALSON VICLE GA 9/2-524-24/5 City/State/Zip 3/745 Phone # Office Use Only CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known): 1. TIME HOSPITALITY UC (Corporation Name) (Document #) (Corporation Name) (Document #) (Corporation Name) (Document #) (Corporation Name) (Document #) Certified Copy Pick up time Certificate of Status Will wait Mail out ☐ Photocopy **NEW FILINGS** AMENDMENTS 🗏 Profit Amendment NonProfit Resignation of R.A., Officer/Director Limited Liability Change of Registered Agent Domestication Dissolution/Withdrawal Other Merger 100002931451--4 -07/14/99--01068--015 ****285.00 ****285.00 OTHER FILINGS REGISTRATION/ QUALIFICATION Annual Report Foreign Fictitious Name Limited Partnership Name Reservation Reinstatement Trademark Other

Examiner's Initials

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

TIME HOSPITALITY LLC

ARTICLE II - Address:

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

5331 WEST UNIVERSITY BLUD.

JACKSONVILLE, FL, 32216

ARTICLE III - Duration:

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

THIRTY (30) YEARS.

ARTICLE IV - Management:

(Check the appropriate box and complete the statement)

☐ The Limited Liability Company is to be managed by a manager or managers and the name(s) and address(es) of such manager(s) who is/are to serve as manager(s) is/are:

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:

271 Box 276

DONALSONVILLE

GA 31745

PARESH NAGINDAS PANCHAL BHUPENDRA CHALANCAL PANCHAL 605 W 3RD STAFET

DONALSONVILLE CA 31745

ARTICLE V - Admission of Additional Members:

The right, if given, of the members to admit additional members and the terms and conditions of the admissions shall be: ADDITIONAL MEMBERS MAY BE ADMITTED DRON

THE ONAMIMOUS WRITTEN AGREEMENT OF THE INITIAL MEMBERS

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: BUSINES MAY CONTINUE UPON UNANIMOUS VOTE OF WRITTEN CONSENT OF ALL REMAINING MEMBERS WITHIN ONE HUNDRED EIGHTY (180) DAYS AFTER SUCH EVENT.

ARTICLE VII - Affidavit of Membership and Contributions

The undersigned member or authorized representative of a member of	M € ertifies:
 the above named limited liability company has at least one member; the total amount of cash contributed by the member(s) is 	\$ 100.06;
3) if any, the agreed value of property other than cash contributed by member(s) is	; \$ <u>Ni</u> _;
(A description of the property is attached and made a part hereto.); and 4) the total amount of cash and property contributed and anticipated to be contributed by member(s) is	\$ 100.60

Signature of a member or an authorized representative of a member.

(In accordance with section 608.408(3), Florida Statutes, the execution of this affidavit constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

BHUPENDER CHAGANLAL PANCHAL.

Typed or printed name of signee

Filing Fee: \$250.00 for Articles and Affidavit

ECHETATI OF STATE

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1.	The name of the limited liability company is: TIME HOSPITA
2.	The name and the Florida street address of the registered agent are:
	D.P. Patel
	Name
	Florida street address (P. O. Box NOT ACCEPTABLE)
	QuiencyFL 32351.

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.

De Pe SIGNATURE

Filing Fee: \$ 35 for Designation of Registered Agent

PILEO

SECRETART OF STATE
ATTANASSEE FLOSIDA