

M15000007602

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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(((H15000227133 3)))



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To: Division of Corporations
Fax Number : (850) 617-6383

From: Account Name : C T CORPORATION SYSTEM
Account Number : FCA000000023
Phone : (850) 205-8842
Fax Number : (850) 878-5368

FILED
15 SEP 23 AM 9:35
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

Email Address: _____

Foreign Limited Liability Company
Anand Vihar LLC

Certificate of Status	0
Certified Copy	0
Page Count	04/6
Estimated Charge	\$125.00

SEP 24 2015
Y SULKER

RE-SUBMIT

From: state of florida filing
date of submission 9/24

Electronic Filing Menu Corporate Filing Menu Help

9/23/2015 3:00:45 PM From: To: 8506176383(3/6)

Anand Vihar, LLC
4600 W Cypress Street
Suite 120
Tampa, Florida 33607

September 22, 2015

Florida Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Re: Consent to use name

Dear Sir/Madam:

Anand Vihar, LLC (the "Company"), organized under the laws of Florida, has filed Articles of Dissolution on September 18, 2015. The Company will not revoke the dissolution and has released its name and will not revoke the rights to its name. This is our consent to allow the Florida Secretary of State to file an Application by Foreign Corporation for Authorization to Transact Business in Florida submitted by Anand Vihar LLC, a Delaware limited liability company.

Very truly yours,

Anand Vihar, LLC, a Florida limited liability company

By: 

— Santosh Govindaraju, as Manager

FILED
15 SEP 23 AM 9:35
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Anand Vihar LLC

Name of Limited Liability Company

The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida..

Please return all correspondence concerning this matter to the following:

c/o Carline Banatte

Name of Person

Shumaker Loop & Kendrick, LLP

Firm/Company

101 East Kennedy Boulevard, Ste. 2800

Address

Tampa, Fl. 33602

City/State and Zip Code

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

C T Corporation System

800

432-3434

Name of Contact Person

at ()

Area Code

Daytime Telephone Number

MAILING ADDRESS:

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

STREET ADDRESS:

Division of Corporations
Registration Section
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Enclosed is a check for the following amount:

☒ \$125.00 Filing Fee

☐ \$130.00 Filing Fee &
Certificate of Status

☐ \$155.00 Filing Fee &
Certified Copy

☐ \$160.00 Filing Fee, Certificate
of Status & Certified Copy



September 22, 2015

FLORIDA DEPARTMENT OF STATE
Division of Corporations

CT CORPORATION SYSTEM

SUBJECT: ANAND VIHAR, LLC
REF: W15000062592

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of a voluntarily dissolved business entity. The name of a voluntarily dissolved business entity is not available for the assumption or use by another entity until 120 days after the effective date of dissolution unless the dissolved business entity provides the Department of State with an affidavit or letter, stating that they have no intention of revoking the dissolution, therefore, releasing the name for use to another entity.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Yasemin Y Sulker
Regulatory Specialist II

FAX Aud. #: H15000227133
Letter Number: 115A00019928

RE-SUBMIT

Please refer only to filing
date of submission 9/21

P.O BOX 6327 - Tallahassee, Florida 32314

RECEIVED

15 SEP 23 PM 3:48

REGULATORY STATE
TALLAHASSEE FL 32314

**APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS
IN FLORIDA**

*IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY
COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:*

1. ANAND VIHAR LLC

(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")

(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Liability Company," "L.L.C.," or "LLC.")

2. DELAWARE

(Jurisdiction under the law of which foreign limited liability company is organized)

3. 47-5087786

(FEI number, if applicable)

4. 09/21/2015

(Date first transacted business in Florida, if prior to registration.)
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. 4600 W. CYPRESS STREET, SUITE 120

TAMPA, FLORIDA 33607

(Street Address of Principal Office)

6. 4600 W. CYPRESS STREET, SUITE 120

TAMPA, FLORIDA 33607

(Mailing Address)

7. Name and street address of Florida registered agent: (P.O. Box **NOT** acceptable)

Name: CT Corporation Systems

Office Address: 1200 South Pine Island Road

Plantation, Florida 33324

(City)

(Zip code)

Registered agent's acceptance:

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 application, 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 relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.



(Registered agent's signature)

Angel Nunez
Assistant Secretary

8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are

SANTOSH GOVINDARAJU, MANAGER

4600 W. CYPRESS STREET, SUITE 120

TAMPA, FLORIDA 33607

9. Attached is a certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted)



Signature of an authorized person

This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

SANTOSH GOVINDARAJU, MANAGER

Typed or printed name of signer

15 SEP 23 4:09:35
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Delaware

The First State

Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF
DELAWARE, DO HEREBY CERTIFY "ANAND VIHAR LLC" IS DULY FORMED UNDER
THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND HAS A
LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS OF
THE NINETEENTH DAY OF SEPTEMBER, A.D. 2015.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN
PAID TO DATE.



5823753 8300

SR# 20150182228

You may verify this certificate online at corp.delaware.gov/authver.shtml

A handwritten signature in black ink, appearing to read "JBULLOCK", is written over a horizontal line. Below the line, the text "Jeffrey W. Bullock, Secretary of State" is printed in a small font.

Authentication: 10090754

Date: 09-18-15