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(Re	equestor's Name)	
(Ac	ddress)	
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LAILANNISSES, FLORIDA

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COVER LETTER

TO:

Registration Section Division of Corporations

SUBJECT:	SURTI KPM INVE	STMENTS LLC						
		Name of I	imited Liability (Company				
The enclosed Existence, an	d "Application by For and check are submitte	eign Limited Liability Comp d to register the above refere	any for Authoriza nced foreign limit	tion to Tra ed liability	nsact Business in Florida," C company to transact busines	ertificate of s in Florida		
Please return	all correspondence o	oncerning this matter to the	following:					
	SARVAJNA K	AZI						
	Name of Person							
SURTI KPM INVESTMENTS LLC Firm/Company								
								2895 SANDERLING DRIVE
Address								
	FREMONT, CA	A 94555						
		City/St	ate and Zip Code					
	KAZISG@GMA	IL.COM						
		E-mail address: (to be used	for future annual	report not	ification)			
For further is	nformation concerning	g this matter, please call:						
SA	RVAJNA KAZI		510 at (299-273	30			
	Name o	f Contact Person	Area Code	Day	time Telephone Number			
Div Reg P.C	AILING ADDRESS: vision of Corporations gistration Section b. Box 6327 lahassee, FL 32314			Division of Registrati Clifton B 2661 Exe	CADDRESS: of Corporations on Section uilding cutive Center Circle ee, FL 32301			
	a check for the follow \$125.00 Filing Fee	ing amount: ☐ \$130.00 Filing Fee & Certificate of Status	☐ \$155.00 Filin Certified Copy	g Fee &	■ \$160.00 Filing Fee, Cert of Status & Certified Copy			

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:

SURTI KPM INVEST	MENTS,LLC						
(Name of Fore	MENTS,LLC eign Limited Liability Company; mu	st inclu	de "Limited Lial	oility Company," "L.L.C.," or "L	LC.")		
(If name unavailable, enter al Liability Company," "L.L.C.	Iternate name adopted for the purpos " or "LLC.")	e of tra	nsacting busines	s in Florida. The alternate name	must include	"Limi	ted
, CALIFORNIA		3	27-3690130				
(Jurisdiction under the law company is organized)	of which foreign limited liability	٦.		(FEI number, if applicable)			
4. n/a							
	(Date first transacted busing (See sections 605.0904 & 605	ess in F	lorida, if prior to	registration.)			
5. 2895 SANDERLING		.0705,	1.5. to determine	penany naomy)		16 (
FREMONT, CA 94555	5)CT :	"lij
	(Street Address of	Princip	al Office)			3	
6. (same as principal offic	ce)				717.7	М	LL)
							N- (
	(Mailing	Addres	s)	 		55	
7. Name and street address	ss of Florida registered agent: (P	.O. Ba	x NOT_accept	able)		_	
Name:	TEJAL DESAI			,			
Office Address:	8924 SOUTHERN BREEZE I	RIVE					
	ORLANDO			, Florida 32836 (Zip code)			
Registered agent's accep	(City)			(Zip code)			
Having been named as re designated in this applica to complywith the provisi	gistered agent and to accept ser tion, I hereby accept the appoin ons of all statutes relative to the my position as registered agent.	tment	as registered a	gent and agree to act in this	capacity. I	furthe	er agree
	, (Regis	tered ag	gent's signature)				
8. The name, title or caps	acity and address of the person(s) who l	nas/have author	rity to manage is/are:			
SARVAJNA KAZI (MAI		,		,			
							
9. Attached is a certificate jurisdiction under the law of the translator must be s	of existence, no more than 90 do of which it is organized. (If the cubmitted)	ertific	ate is in a foreig	gn language, a translation of the	stody of rec	cords i	n the er oath
	Salvoji	a K	27				
	Sarvaya	ofan	authorized person	n			
This document is executed submitted in a document to	d in accordance with section 605. the Department of State constit	.0203 (1) (b), Florida :	Statutes. I am aware that any f	alse informa	ation	
	SARVAINA KAZI		-		·		

Typed or printed name of signee

State of California Secretary of State

CERTIFICATE OF STATUS

ENTITY NAME: SURTI KPM INVESTMENTS, LLC

FILE NUMBER:

JURISDICTION:

201026610129

FORMATION DATE:

09/21/2010

TYPE:

DOMESTIC LIMITED LIABILITY COMPANY

CALIFORNIA

STATUS:

ACTIVE (GOOD STANDING)

I, ALEX PADILLA, Secretary of State of the State of California, hereby certify:

The records of this office indicate the entity is authorized to exercise all of its powers, rights and privileges in the State of California.

No information is available from this office regarding the financial condition, business activities or practices of the entity.



IN WITNESS WHEREOF, I execute this certificate and affix the Great Seal of the State of California this day of October 19, 2016.

ALEX PADILLA
Secretary of State