

M20000004943

(Requestor's Name)

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(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

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Certificates of Status _____

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i019000035950

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04/05/19--01023--005 **160.00

06/03/20--01002--007 **138.75

06/03/20--01002--008 **638.75

2020 JUN -2 PM 12:34
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JUN 3 2020

M. SOLOMON

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: S.A.V. Hydraulics & Machine, 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:

SACHIN SHARMA

Name of Person

S.A.V. Hydraulics & Machine, LLC

Firm/Company

430 SALT MEADOW CIR UNIT 105

Address

BRADENTON, FL 34208-1755

City/State and Zip Code

info@savhydraulics.com

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

For further information concerning this matter, please call:

SACHIN SHARMA

954 778-6159
at ()

Name of Contact Person

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:

Please make check payable to: **FLORIDA DEPARTMENT OF STATE**

☐ \$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

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. S.A.V. Hydraulics & Machine, 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. Wyoming
(Jurisdiction under the law of which foreign limited liability company is organized)

3. 82-3868078
(FEI number, if applicable)

4. August 07, 2018
(Date first transacted business in Florida, if prior to registration.)
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. 430 SALT MEADOW CIR UNIT 105
(Street Address of Principal Office)

6. 60 E Simpson Ave
(Mailing Address)

BRADENTON, FL 34208-1755
PO Box 2869
Jackson, WY 83001

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

Name: SACHIN SHARMA

Office Address: 430 SALT MEADOW CIR UNIT 105

BRADENTON, Florida 34208-1755
(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)

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JUN -2 PM 12:34
CLERK OF COURT
JACKSON, WY

8. For initial indexing purposes, list names, title or capacity and addresses of the primary members/managers or persons authorized to manage [up to six (6) total]:

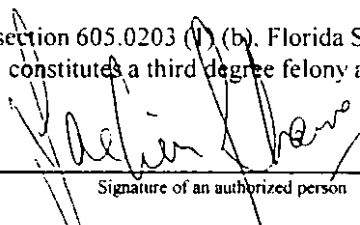
<u>Title or Capacity:</u>		<u>Name and Address:</u>		<u>Title or Capacity:</u>		<u>Name and Address:</u>	
<input checked="" type="checkbox"/> Manager	Name:	SACHIN SHARMA		<input type="checkbox"/> Manager	Name:		
<input checked="" type="checkbox"/> Member	Address:	430 SALT MEADOW CIR UNIT 105		<input type="checkbox"/> Member	Address:		
<input checked="" type="checkbox"/> Authorized Person		BRADENTON, FL 34208-1755		<input type="checkbox"/> Authorized Person			
<input type="checkbox"/> Other		<input type="checkbox"/> Other		<input type="checkbox"/> Other		<input type="checkbox"/> Other	
<input checked="" type="checkbox"/> Manager	Name:	VISHAL NALINVILAWAN		<input type="checkbox"/> Manager	Name:		
<input checked="" type="checkbox"/> Member	Address:	816/19 CHARANSNITWONG		<input type="checkbox"/> Member	Address:		
<input type="checkbox"/> Authorized Person		BANGKOK, THAILAND 10600		<input type="checkbox"/> Authorized Person			
<input type="checkbox"/> Other		<input type="checkbox"/> Other		<input type="checkbox"/> Other		<input type="checkbox"/> Other	
<input checked="" type="checkbox"/> Manager	Name:	ARUN NALINVILAWAN		<input type="checkbox"/> Manager	Name:		
<input checked="" type="checkbox"/> Member	Address:	816/19 CHARANSNITWONG		<input type="checkbox"/> Member	Address:		
<input type="checkbox"/> Authorized Person		BANGKOK, THAILAND 10600		<input type="checkbox"/> Authorized Person			
<input type="checkbox"/> Other		<input type="checkbox"/> Other		<input type="checkbox"/> Other		<input type="checkbox"/> Other	

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2020 JUN -2 PM 12:34
TAMPA, FLORIDA
CLERK OF CIRCUIT COURT

Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed individuals may be added to the index when filing your Florida Department of State Annual Report form.

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)

10. 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.



Signature of an authorized person

SACHIN SHARMA

Typed or printed name of signee

STATE OF WYOMING
Office of the Secretary of State

I, EDWARD A. BUCHANAN, SECRETARY OF STATE of the STATE OF WYOMING, do hereby certify that according to the records of this office,

S.A.V. Hydraulics & Machine, LLC

is a

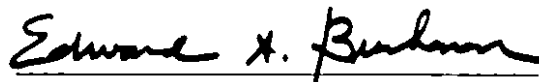
Limited Liability Company

formed or qualified under the laws of Wyoming did on **January 3, 2018**, comply with all applicable requirements of this office. Its period of duration is Perpetual. This entity has been assigned entity identification number **2018-000782981**.

This entity is in existence and in good standing in this office and has filed all annual reports and paid all annual license taxes to date, or is not yet required to file such annual reports; and has not filed Articles of Dissolution.

I have affixed hereto the Great Seal of the State of Wyoming and duly generated, executed, authenticated, issued, delivered and communicated this official certificate at Cheyenne, Wyoming on this 17th day of May, 2020 at 12:56 PM. This certificate is assigned ID Number 036760427.




Secretary of State



FLORIDA DEPARTMENT OF STATE
Division of Corporations

April 9, 2019

SACHIN SHARMA
430 SALT MEADOW CIR, UNIT 105
BRADENTON, FL 34208-1755

SUBJECT: S.A.V. HYDRAULICS & MACHINE, LLC
Ref. Number: W19000035950

We have received your document for S.A.V. HYDRAULICS & MACHINE, LLC and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Pursuant to section 607.1502(4), 617.1502(4) or 605.0904(7), Florida Statutes, this entity is liable for a civil penalty of at least \$500 but not more than \$1000 for each year this entity transacted business or conducted its affairs in Florida prior to qualification. In addition to this civil penalty, the appropriate annual report fees that would have been due this office had the entity qualified the year it began operations in this state are also due. The amount due this office to cover both annual report(s) and penalty fees is \$638.75.

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) 245-6052.

Brooke N Kinsey
Regulatory Specialist II

Letter Number: 919A00007122

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MAY 28 2020

www.sunbiz.org

Division of Corporations - P.O. BOX 6327 -Tallahassee, Florida 32314

May 27, 2020

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

SUBJECT: S.A.V. HYDRAULICS & MACHINE, LLC
Ref. Number: W19000035950

Dear Florida Department of State,

This letter is in response to the letter number: 919A00007122.

I understand that the documents were not filed and were returned because there is a civil penalty fee of \$638.75 due.

I am re-submitting the documents along with the payment for the fine. Please find attached:

1. Letter Number: 919A00007122
2. Signed Application Form
3. Certificate of Good Standing
4. Check of \$638.75 for the civil penalty fees

If there are any issues related to this filing of my documents, please call me at (954) 778-6159.

Sincerely,
Sachin Sharma MBR
S.A.V. Hydraulics & Machine, LLC

May 29, 2020

Registration Section
Division of Corporations
Florida Department of State
Centre of Tallahassee
2415 N. Monroe St., Suite 810,
Tallahassee, FL 32303

TEL: 850-245-6968

SUBJECT: S.A.V. HYDRAULICS & MACHINE, LLC
Ref. Number: W19000035950

Dear Melanie Solomon,

As per our conversation, please find attached a check of \$138.75 for the additional fees.

Sincerely,
Sachin Sharma MBR
S.A.V. Hydraulics & Machine, LLC
430 Salt Meadow Cir Unit 105
Bradenton FL 34208-1755
(954) 778-6159

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