

M23000011613

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

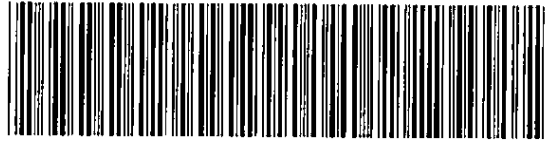
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer.

Office Use Only



700414485267

2023 SEP 11 PM 2:44

RECEIVED

2023 SEP 11 PM 12:01

ALL INFORMATION CONTAINED HEREIN IS UNCLASSIFIED

CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301
(850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

SHREE ASHTAVINAYAK LLC

Please Debit FCA000000003 For: 125

Thank you Seth Neeley



Signature

Requested by:

Name

Date

Time

Walk-In

Will Pick Up

- ___ Art of Inc. File _____
- ___ LTD Partnership File _____
- ___ Foreign Corp. File _____
- ___ L.C. File _____
- ___ Fictitious Name File _____
- ___ Trade/Service Mark _____
- ___ Merger File _____
- ___ Art. of Amend. File _____
- ___ RA Resignation _____
- ___ Dissolution / Withdrawal _____
- ___ Annual Report / Reinstatement _____
- ___ Cert. Copy _____
- ___ Photo Copy _____
- ___ Certificate of Good Standing _____
- ___ Certificate of Status _____
- ___ Certificate of Fictitious Name _____
- ___ Corp Record Search _____
- ___ Officer Search _____
- ___ Fictitious Search _____
- ___ Fictitious Owner Search _____
- ___ Vehicle Search _____
- ___ Driving Record _____
- ___ UCC 1 or 3 File _____
- ___ UCC 11 Search _____
- ___ UCC 11 Retrieval _____
- ___ Courier _____

September 6, 2023

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

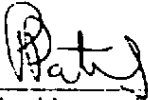
Re: Articles of Dissolution for SHREE ASHTAVINAYAK LLC

Dear Sir:

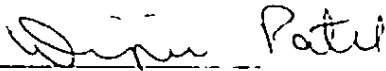
The undersigned are the sole managers and members of SHREE ASHTAVINAYAK LLC, a Florida limited liability company. We have filed the articles of dissolution for SHREE ASHTAVINAYAK LLC, a Florida limited liability company (document # L23000397456).

We are waiving the right to file a revocation of the dissolution for the above referenced LLC. In addition, we hereby consent to the filing by SHREE ASHTAVINAYAK LLC, an Indiana limited liability company of the Application by Foreign LLC for Authorization to Transact Business in Florida under the same LLC name as SHREE ASHTAVINAYAK LLC.

Thank you.



Prakashkumar Patel, as Manager and Member of SHREE ASHTAVINAYAK LLC



Dipika Patel, as Manager and Member of SHREE ASHTAVINAYAK LLC

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: SHREE ASHTAVINAYAK 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.

S. I. Valbh, Esq.

Name of Person

Bogin Munns & Munns Law Firm

Firm/Company

1000 Legion Place, 10th Fl.

Address

Orlando, FL 32801

City/State and Zip Code

patrick.patel32@gmail.com

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

For further information concerning this matter, please call:

S. I. Valbh

407

573-1334

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:

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 680.02, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY
COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA

1. SHREE ASHTAVINAYAK LLC
(Name of Foreign Limited Liability Company, must include "Limited Liability Company," "LLC," 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," "LLC," or "LLC.")

2. Indiana 3. 46-3032582
(Jurisdiction under the law of which foreign limited liability company is organized) (F.I. number, if applicable)

4. _____
(Does first transacted business in Florida, if prior to registration.)
(See sections 675.0904 & 601.0901, F.S. to determine penalty liability.)

5. 950 SE Federal Highway 6. 950 SE Federal Highway
(Street Address of Principal Office) (Mailing Address)

Stuart, FL 34994 Stuart, FL 34994

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

Name: Prakashkumar Patel
Office Address: 950 SE Federal Highway
Stuart, FL 34994, Florida
(City) (Zip code)

2023 SEP 11 PM 2:43

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.

Patel
(Registered agent's signature)

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):

Title or Capacity: Name and Address:
☒ Manager Name: Prakashkumar Patel
☐ Member Address: 950 SE Federal Highway
☐ Authorized Stuart, FL 34994
Person _____
☐ Other _____ ☐ Other _____

Title or Capacity: Name and Address:
☒ Manager Name: Dipika Patel
☐ Member Address: 950 SE Federal Highway
☐ Authorized Stuart, FL 34994
Person _____
☐ Other _____ ☐ Other _____

☐ Manager Name: _____
☐ Member Address: _____
☐ Authorized _____
Person _____
☐ Other _____ ☐ Other _____

☐ Manager Name: _____
☐ Member Address: _____
☐ Authorized _____
Person _____
☐ Other _____ ☐ Other _____

☐ Manager Name: _____
☐ Member Address: _____
☐ Authorized _____
Person _____
☐ Other _____ ☐ Other _____

☐ Manager Name: _____
☐ Member Address: _____
☐ Authorized _____
Person _____
☐ Other _____ ☐ Other _____

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.



Prakashkumar Patel

Signature of an authorized person



Typed or printed name of signer

State of Indiana
Office of the Secretary of State

CERTIFICATE OF EXISTENCE

To Whom These Presents Come, Greeting:

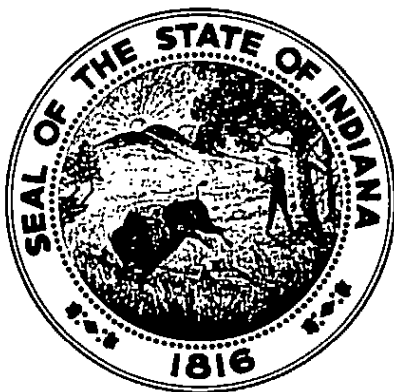
I, DIEGO MORALES, Secretary of State of Indiana, do hereby certify that I am, by virtue of the laws of the State of Indiana, the custodian of the corporate records and the proper official to execute this certificate.

I further certify that records of this office disclose that

SHREE ASHTAVINAYAK LLC

duly filed the requisite documents to commence business activities under the laws of the State of Indiana on July 18, 2013, and was in existence or authorized to transact business in the State of Indiana on September 06, 2023.

I further certify this Domestic Limited Liability Company has filed its most recent report required by Indiana law with the Secretary of State, or is not yet required to file such report, and that no notice of withdrawal, dissolution, or expiration has been filed or taken place. All fees, taxes, interest, and penalties owed to Indiana by the domestic or foreign entity and collected by the Secretary of State have been paid.



In Witness Whereof, I have caused to be affixed my signature and the seal of the State of Indiana, at the City of Indianapolis, September 06, 2023

Diego Morales

DIEGO MORALES
SECRETARY OF STATE

2013071800432 / 20233358593

All certificates should be validated here: <https://bsd.sos.in.gov/ValidateCertificate>

Expires on October 06, 2023.

September 6, 2023

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


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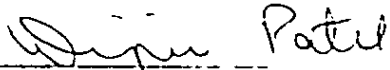
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