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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

AUG 25 2014

T. BROWN

**COVER LETTER**

**TO: Registration Section  
Division of Corporations**

**SUBJECT: RAJBARI INNOVATIVE SOCIETY OF FLORIDA LLC**  
Name of Limited Liability Company

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

MD. MOHIDUL ISLAM

Name of Person

RAJBARI INNOVATIVE SOCIETY OF FLORIDA LLC

Firm/Company

1201 NW 13TH STREET Apt#427B

Address

BOCA RATON, FL. 33486

City/State and Zip Code

mohidul\_milon@yahoo.com

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

For further information concerning this matter, please call:

MD. MOHIDUL ISLAM at ( 561 ) 541-4284

Name of Person

Area Code

Daytime Telephone Number

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  
(additional copy is enclosed)

☒ \$160.00 Filing Fee,  
Certificate of Status &  
Certified Copy  
(additional copy is enclosed)

**Mailing Address**

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

**Street/Courier Address**

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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

August 7, 2014

MD. MOHIDUL ISLAM  
1201 NW 13TH ST APT 427B  
BOCA RATON, FL 33486

SUBJECT: RAJBARI MULTI-PURPOSE COOPERATIVE SOCIETY OF  
FLORIDA LLC  
Ref. Number: W14000048467

We have received your document for RAJBARI MULTI-PURPOSE COOPERATIVE SOCIETY OF FLORIDA 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):

According to section 618.27, Florida Statutes, no person doing business in this state shall be entitled to use the word "cooperative" aspart of its corporate or other business name unless they fall under the provisions of Chapter 618.

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.

Teresa Brown  
Regulatory Specialist II

Letter Number: 814A00017006

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

**ARTICLE I - Name:**

The name of the Limited Liability Company is:

RAJBARI INNOVATIVE SOCIETY OF FLORIDA LLC

(Must end with the words "Limited Liability Company," "L.L.C.," or "LLC.")

**ARTICLE II - Address:**

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

**Principal Office Address:**

MD. MOHIDUL ISLAM  
1201 NW 13TH STREET Aptt# 427B  
BOCA RATON, FL, 33486

**Mailing Address:**

MD. MOHIDUL ISLAM  
1201 NW 13TH STREET, Aptt# 427B  
BOCA RATON, FL, 33486

**ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:**

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

The name and the Florida street address of the registered agent are:

MD. MOHIDUL ISLAM  
Name  
1201 NW 13TH STREET Aptt# 427B  
Florida street address (P.O. Box **NOT** acceptable)  
BOCA RATON FL 33486  
City Zip

*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 as provided for in Chapter 605, F.S.*

Mohidul Islam

Registered Agent's Signature (REQUIRED)

(CONTINUED)

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TALLAHASSEE, FLORIDA

**ARTICLE IV-**

The name and address of each person authorized to manage and control the Limited Liability Company:

**Title:**

"AMBR" = Authorized Member

"MGR" = Manager

PRESIDENT

**Name and Address:**

MOHAMMAD LILLAH KHAN

120 NW 70th Street Aptt. 103

Boca Raton, FL, 33487

VICE PRESIDENT

MOHAMMED TOFAZZAL HOSSAIN

566 NW 55th Terrace

Boca Raton, FL, 33487

SECRETARY

MUHAMMAD SAFIQUIL ISLAM

200 NE 20th Street Aptt. 119C

Boca Raton, FL, 33431

TREASURER

MD. MOHIDUL ISLAM

1201 NW 13th Street Aptt. 427B

Boca Raton, FL, 33486

(Use attachment if necessary)

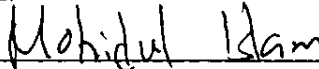
**ARTICLE V:** Effective date, if other than the date of filing: \_\_\_\_\_ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

**ARTICLE VI:** Other provisions, if any.

This LLC is a social cooperative and therefore should follow under the laws that pertain to florida cooperatives. The goal of this multi-purpose cooperative is to accumulate capital from its members and use it towards conducting business, social, or cultural activities for the community.

**REQUIRED SIGNATURE:**



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

(In accordance with section 605.0203 (1) (b), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. 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.)

MD. MOHIDUL ISLAM

Typed or printed name of signee

**Filing Fees:**

**\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent**

**\$ 30.00 Certified Copy (Optional)**

**\$ 5.00 Certificate of Status (Optional)**