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	(Requestor's Name)
	(Address)
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	(City/State/Zip/Phone #)
	D WAIT MAIL
	(Business Entity Name)
	(Document Number)
Certified Copies	Certificates of Status
Special Instructions	to Filing Officer:
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FLORIDA DEPARTMENT OF STATE Division of Corporations

January 31, 2023

CAPITAL CONNECTION, INC.

SUBJECT: AARYA INVESTMENTS LLC Ref. Number: W23000012634

We have received your document for and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please include the name of the second person authorized to manage the company.,

If you have any further questions concerning your document, please call (850) 245-6052.

Summer Chatham Regulatory Specialist II New Filing Section

Letter Number: 523A00002271

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www.sunbiz.org

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417 E. Virginia Street, S (850) 224-8870 • 1-80		Florida 32301	
AARYA INVESTM	IENTS LLC		
			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
Signature			Fictitious Owner Search
Signature			Vehicle Search
			Driving Record
Requested by: SETH	01/06/02		UCC 1 or 3 File
·	$-\frac{01/26/23}{Data}$		UCC 11 Search
Name	Date	Time	UCC 11 Retrieval
Walk-In	Will Pick Up		Courier

CAPITAL CONNECTION, INC.

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

AARYA INVESTMENTS LLC

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____

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Requested b	у: seth
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Name	
Walk In	

W

Date	Time
Will Dick Up	

01/26/23



ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

AARYA INVESTMENTS LLC

(Must contain 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:	Mailing Address:	
2437 SE 1ST ST	2437 SE 1ST ST	
HOMESTEAD, FL 33033	HOMESTEAD, FL 33033	

ARTICLE III - Registered Ager (The Limited Liability Company of another business entity with an ac	cannot serve as its own	Registered Agent.	at's Signature: You must designate an indi		2023 FEB	
The name and the Florida street a	ddress of the registered	d agent are:		IAR' AHAS	8 - 1	
	ADRIAN FERRER			OF S	2	in.
		Name		E.S.	1	\bigcirc
	2437 SE IST ST				: 22	
	Florida street addres	s (P.O. Box NOT a	cceptable)	•		
	HOMESTEAD	FL	33033			
	City	State	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.

alter uterrer

Registered Agent's Signature (REQUIRED)

(CONTINUED)

ARTICLE IV-

· · · · · ·

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

Title: "AMBR" = Authorized Member	Name and Address:	
"MGR" = Manager AMBR	ADRIAN FERRER 2437 SE IST ST HOMESTEAD, FL 33033	
	SEC REL A LL	
	AAR AAAS BE	F

(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.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

ARTICLE VI: Other provisions, if any.

REOUIRED SIGNATURE:

alinan Ferrer

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

ADRIAN FERRER

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)