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ALLABASSEE, FLORIG

# CAPITAL CONNECTION, INC.

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

SUBHANALLA	AH HOLDINGS 2 LLC	' 
Please Debit FC	A000000003 For: 125	
Thank you Seth l	Neeley	
Staff		Art of Inc. File
		UTD 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
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		Certificate of Status 777
		Certificate of Fictitious Name
		Corp Record Search
,		Officer Search
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Signature		Fictitious Owner Search
Signature		Vehicle Search
		Driving Record
Requested by:		UCC 1 or 3 File
N	D	UCC 11 Search
Name	Date Time	UCC 11 Retrieval
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## COVER LETTER

	New Filing Sec Division of Co					
SUBJEC		lah Holdings 2 LLC				
CODOTA,	··	Name	of Limited Li	ability Company		
The enclo	sed Articles of	Organization and fee	(s) are submi	tted for filing.		
Please ret	urn all corresp	ondence concerning t	his matter to t	he following:		
	Yasir Billoc	)				
			Name	e of Person		
	Internationa	Law Partners LLP				
	Firm/Company					
	2122 Hollyv	vood Blvd.				
	<del></del>		۸	ddress		
	Hollywood.	FL 33020				
			City/State	e and Zip Code		<del></del> -
	ybilloo@ilp.l					
				re annual report notificat	ion)	
For further	information ec	oncerning this matter,	please call:			
	Yasir Billoo		954 at (	3747722 )		202
	Nan	ne of Person	Area Cod		ne Number	2024 HAR 19
Enclosed	is a check for t	he following amount:			1	9
<b>■\$125.0</b>	0 Filing Fee	□\\$130.00 Filing I Certificate of State	ıs Cei	\$155,00 Filing Fee & rtifled Copy ional copy is enclosed)	ि\$160.00   वृशिष्ण हो। Certificate ता \$150 Certified Copy (additional copy)। (additional copy)।	
	Mailir	ig Address		Street Address		

New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, Ft. 32314

New Filing Section Division The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, Fl. 32303

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Lia	bility Company is:			
Subhan Allah Hol	dings 2 LLC			
(Must c	ontain the words "Limited	Liability Company,	"L.L.C.," or "LLC.")	
ARTICLE II - Address: The mailing address and street	et address of the principal o	office of the Limited	Liability Company is:	
<u>Prin</u>	cipal Office Address:		Mailing Addr	ess:
3315 Fairfield La Weston, FL 3333			5 Fairfield Lane ston, FL 33331	
The name and the Florida str	eet address of the registered  Yasir Billoo Esq.	I agent are:		
	2122 Hollywood Bly Florida street addres		acceptable)	
	Hollywood	FL	33020	
	City	State	Zip	
Having been named as register place designated in this certific further agree to comply with the am familiar with and accept the	ate. I hereby accept the app e provisions of all statutes re e obligations of my position	ointment as register clating to the proper as registered agent	red agent and agree to act is rand complete performance as provided for in Chapter ture (REQUIRED)	in this capacity. I se of my duties, and I

## ARTICLE IV-

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

<u>Ittle:</u>	4 4 2 114 1	Name and Address:	
	Authorized Member		
"MGR" = N	ianager		
MGR	<u> </u>	Sammed Govaria	
		3315 Fairfield Lane Weston, FL 33331	
		Weston, Ft. 55551	
MGR		Alloudin Bhullar	
.71010		2980 Paddock Road	
		Weston, FL 33331	
	<del></del>		
		-	
			<del></del>
an effective date in a date of filing.) ote: If the date ins	s listed, the date must be sp	e of filing:	ays prior to or 90 days aft
RTICLE VI: Other	provisions, if any.		
DEMIDE	<u>D</u> SIGNATURE:	Sammed Govaria  ember or an authorized representative of a mitted in accordance with section 605.0203 (1) (b), the information submitted in a document to the Deep felony as provided for in s.817,155, F.S.  a  Typed or printed name of signee	2
KEOUIKE	Z SIGNATORE:		
		Sammed Govaria	
	Signature of a m	ember or an authorized representative of a m	ember.
	This document is execu	ited in accordance with section 605.0203 (1) (b).	Florida Statutes.
	I am aware that any fals	e information submitted in a document to the De	partment of State
	constitutes a third degre	ee felony as provided for in s.817.155, F.S.	
	Sammed Govari	il Consideration of the constant of the consta	<i>``</i> ````````
		ryped or printed name of signee	ြုံ့ ကျွ

## 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)