

L24000218662

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

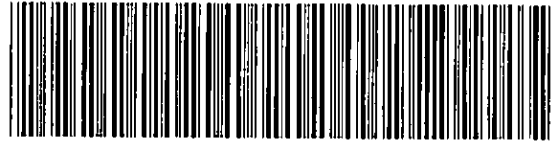
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



700425676397

S. CHATHAM
MAY 17 2024

05/17/24--01018--007 **46.25

FILED
2023 MAR 20 AM 8:06
SECRETARY OF STATE
TALLAHASSEE, FL

From: Costello, Kain <kain.costello@dos.myflorida.com>

To: majhar99@yahoo.com <majhar99@yahoo.com>

Sent: Wednesday, April 3, 2024 at 03:49:11 PM EDT

Subject: This email is in regards to your filing for P23000023001 ALAM PROPERTY INVESTMENT, LLC

Please fill out and mail in the attached form along with a check for the difference in filing amount to my attention the amount owed for the filing would be \$46.25.

Kain Costello

New Filings section

Regulatory Specialist II

Florida Dept. of State

Division of Corporations

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: ALAM PROPERTY INVESTMENT, 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:

Majharul Alam

Name of Person

Firm/Company

6410 BOYD LANE

Address

LAKE WORTH, FL 33462

City/State and Zip Code

majhar99@yanoo.com

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

For further information concerning this matter, please call:

at ()
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

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

Street Address

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 Liability Company is:

ALAM PROPERTY INVESTMENT, 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:

4683 Hairland Drive West Palm Beach, FL 33415

6410 Boyd Lane, Lake Worth, FL 33462

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:

Majharul Alam

Name

6410 Boyd Lane

Florida street address (P.O. Box **NOT** acceptable)

Lake Worth

Florida


33462

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..



Registered Agent's Signature (REQUIRED)

(CONTINUED)

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ARTICLE IV-

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

Title:

"AMBR" = Authorized Member

"MGR" = Manager

Name and Address:

MGR

Majharul Alam

6410 Boyd Lane, Lake Worth, FL 33462

(Use attachment if necessary)

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2023 MAR 30 AM 8:06
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TALLAHASSEE, FL

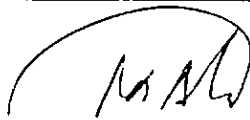
ARTICLE V: Effective date, if other than the date of filing: _____ (OPTIONAL)

(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.

REQUIRED SIGNATURE:



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.

Majharul Alam

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)