

L24000296028

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

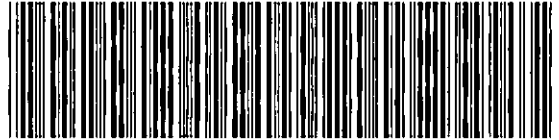
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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06/26/24--01028--009 **125.00

FILED
2024 JUN 26 PM 3:00
JUL 26 2024

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: AIMSSOLUTIONS, LLC

Name of Limited Liability Company

The enclosed Articles of Organization and fees are submitted for filing.

Please return all correspondence concerning this matter to the following:

Kumar Indrajit Das

Name of Person

Firm Company

15301 Montesino Dr

Address

Orlando, FL 32828

City State and Zip Code

indro.bit@gmail.com

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

For further information concerning this matter, please call:

Kumar Indrajit Das

at (239)

3083608

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

2024 JUN 25 PM 3:00

1571 ETD

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

AIMSSOLUTIONS, 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:

15301 Montesino Dr
Orlando, FL 32828

Mailing Address:

15301 Montesino Dr
Orlando, FL 32828

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:

Kumar Indrajit Das

Name

15301 Montesino Dr

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

Orlando

FL

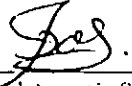
32828

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)

2024 JUN 26 PM 3:00

FILED

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:

<u>MGR</u>	Kumar Indrajit Das 15301 Montesino Dr Orlando, FL 32828, USA
<u>AMBR</u>	Prottoy Dipita Sen 5C Kalamina Way Truganina, Victoria 3029, Australia
<u>AMBR</u>	Khandaker Reshad Islam House # 389, Flat 6AB, Jafrabad, Ittadi More, Mohammadpur Dhaka 1207, Bangladesh
<u>AMBR</u>	Ahanaf Talunid House # 389, Flat 6AB, Jafrabad, Ittadi More, Mohammadpur Dhaka 1207, Bangladesh

(Use attachment if necessary)


ARTICLE V: Effective date, if other than the date of filing: 06/19/2024 (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.

Kumar Indrajit Das


Typed or printed name of signer

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)


Continuation of Article IV -

Title	Name and Address
AMBR	Joyanto Kumar Das
	House 11, Road 04 Block C Mirpur 02 Dhaka 1216, Bangladesh

KID

2024 JUN 26 PM 3:00

First and Last Name breakdown for Authorized Members as shown below:

Title	Last Name & First Name
MGR	Das, Kumar Indrajit
AMBR	Sen, Prottoy Diptta
AMBR	Islam, Khandaker Reshad
AMBR	Tahmid, Ahanaf
AMBR	Das, Joyanto Kumar

KED

2024 JUL 26 PM 3:00