

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L23000410545

Entity Name: BIN OPTIONS POOL LLC**Current Principal Place of Business:**713 TRIANA STREET
WEST PALM BEACH, FL 33413**Current Mailing Address:**713 TRIANA STREET
WEST PALM BEACH, FL 33413 US**FEI Number:** 93-3197658**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**HANNAN, MOHAMMAD A
2355 THOMSON WAY
WELLINGTON, FL 33414 US*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.***SIGNATURE:**

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MGR
Name HANNAN, MOHAMMAD A
Address 2355 THOMSON WAY
City-State-Zip: WELLINGTON FL 33414

Title MGR
Name MAHMUD, PERVEZ
Address 15 OVERLAND RD
City-State-Zip: EAST BRUNSWICK NJ 08816

Title LIMITED MEMBER
Name LOMAN, ABDULLAH AL
Address 3709 COLBY CHASE DR.,
City-State-Zip: APEX NC 27539

Title LIMITED MEMBER
Name NAG, ABHIJIT KUMAR
Address 812 MALLOW RD.
City-State-Zip: LEANDER TX 78641

Title LIMITED MEMBER
Name SULTANA, AEYSHA
Address 913 BOYD CREEK
City-State-Zip: MCKINNEY TX 75071

Title LIMITED MEMBER
Name ASIF, AMIR AHMED
Address 1000 KIELY BLVD
96
City-State-Zip: SANTA CLARA CA 95051

Title LIMITED MEMBER
Name CHOWDHURY, AMIRA YOUSUF
Address 15627 SAND BLUESTEM DRIVE
City-State-Zip: CYPRESS TX 77433

Title LIMITED MEMBER
Name AHMED, AQUIB
Address 590 E BUCHTEL AVE
23
City-State-Zip: AKRON OH 44304

Continues on page 2

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: MOHAMMAD HANNAN

MGR

04/27/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date

Authorized Person(s) Detail Continued :

Title	LIMITED MEMBER
Name	AZAD, ARIF
Address	2085 FLORINE DR
City-State-Zip:	APEX NC 27502

Title	LIMITED MEMBER
Name	KABIR, ASHFANOOR
Address	724 BLOSSOM BAY LANE
City-State-Zip:	APEX NC 27523

Title	LIMITED MEMBER
Name	SAHA, DIPONKOR
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