

**Electronic Articles of Organization
For
Florida Limited Liability Company**

L24000468140
FILED 8:00 AM
November 04, 2024
Sec. Of State
kcostello

Article I

The name of the Limited Liability Company is:
SANFORD WALMART IFIX AND REPAIR LLC

Article II

The street address of the principal office of the Limited Liability Company is:
1601 RINEHART ROAD
SANFORD, FL. US 32771

The mailing address of the Limited Liability Company is:
4914 AMASA CIRCLE
WEST MELBOURNE, FL. US 32904

Article III

The name and Florida street address of the registered agent is:
MD M HOSSEN
1601 RINEHART ROAD
SANFORD, FL. 32771

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.

Registered Agent Signature: MD M HOSSEN

Article IV

The name and address of person(s) authorized to manage LLC:

Title: MGR
MD M HOSSEN
4914 AMASA CIRCLE
WEST MELBOURNE, FL. 32904 US

Title: MGR
MOHAMMAD FARUK
20655 SW 93RD AVENUE
MIAMI, FL. 33189 US

Title: MGR
MOHAMMED FOWAD
333 MCDONALD AVENUE APT 6H
BROOKLYN, FL. 11218 NY

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Article V

The effective date for this Limited Liability Company shall be:

01/01/2025

Signature of member or an authorized representative

Electronic Signature: MD M HOSSEN

I am the member or authorized representative submitting these Articles of Organization and affirm that the facts stated herein are true. I am aware that 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. I understand the requirement to file an annual report between January 1st and May 1st in the calendar year following formation of the LLC and every year thereafter to maintain "active" status.