

2005 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L02000003763

FILED
Jan 05, 2005
Secretary of State

Entity Name: ARIELI INVESTMENTS LLC

Current Principal Place of Business:

33 PIER KENIG ST.
JERUSALEM, ISRAEL, 93469

New Principal Place of Business:

33 PIER KENIG ST.
JERUSALEM, ISRAEL, OC 93469 OC

Current Mailing Address:

33 PIER KENIG ST.
JERUSALEM, ISRAEL, 93469

New Mailing Address:

33 PIER KENIG ST.
JERUSALEM, ISRAEL, OC 93469 OC

FEI Number: 98-0371090 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

FLORIDA INCORPORATORS, INC.
8875 HIDDEN RIVER PKWY, STE. 300
TAMPA, FL 33637 US

Name and Address of New Registered Agent:

ROSEN, PHILIP C
8551 WEST SUNRISE BLVD.
SUITE 208
FT. LAUDERDALE, FL 33322 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: PHILIP ROSEN

01/05/2005

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MEMBERS:

Title: MGR () Delete
Name: AZULAY, ARIEL
Address: 33 PIER KENIG ST.
City-St-Zip: JERUSALEM, ISRAEL, 93469

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: AZULAY, ARIEL
Address: 33 PIER KENIG ST.
City-St-Zip: JERUSALEM, ISRAEL, OC 93469 OC

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this 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 608, Florida Statutes.

SIGNATURE: ARIEL UZULAY

MGRM

01/05/2005

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date