

**2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L12000102914

**Entity Name:** S.O.I. INVESTMENTS LLC

**Current Principal Place of Business:**

9259 NW 45TH ST  
SUNRISE, FL 33331

**Current Mailing Address:**

9259 NW 45TH ST  
SUNRISE, FL 33331 US

**FEI Number:** 80-0845527

**Certificate of Status Desired:** Yes

**Name and Address of Current Registered Agent:**

SHOCK, SHLOMO  
9259 NW 45TH ST  
SUNRISE, FL 33331 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 MGRM  
Name ARAD, OREN  
Address 9259 NW 45TH ST  
City-State-Zip: SUNRISE FL 33331

Title MGRM  
Name SHOCK, SHLOMO  
Address 9259 NW 45TH ST  
City-State-Zip: SUNRISE FL 33331

Title MGRM  
Name SHOCK, ITAY  
Address 9259 NW 45TH ST  
City-State-Zip: SUNRISE FL 33331

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:** OREN ARAD

**MANAGING MEMBER**

**02/08/2018**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date