

**2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L15000100848

**Entity Name:** SHALOM LE BNAI DODI LLC

**Current Principal Place of Business:**

25 SOUTHEAST SECOND AVENUE  
407  
MIAMI, FL 33131

**Current Mailing Address:**

25 SOUTHEAST SECOND AVENUE  
407  
MIAMI, FL 33131

**FEI Number:** APPLIED FOR

**Certificate of Status Desired:** No

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

FRANCO, ISAAC  
25 SOUTHEAST SECOND AVENUE  
407  
MIAMI, FL 33131 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 FRANCO, ISAAC  
Address 330 NORTH HIBISCUS DRIVE  
City-State-Zip: MIAMI BEACH FL 33139

Title AMBR  
Name RETTER, AHUVA  
Address 330 NORTH HIBISCUS DRIVE  
City-State-Zip: MIAMI BEACH FL 33139

Title AMBR  
Name BIK, MOSHE  
Address 330 NORTH HIBISCUS DRIVE  
City-State-Zip: MIAMI BEACH FL 33139

Title AMBR  
Name BIK, HAYAH  
Address 330 NORTH HIBISCUS DRIVE  
City-State-Zip: MIAMI BEACH FL 33139

*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:** ISAAC FRANCO

**MANAGER**

**03/26/2018**

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

\_\_\_\_\_  
Date