

**2018 FLORIDA LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L15000200672

**Entity Name:** HALFY INVESTMENTS LLC

**Current Principal Place of Business:**

3996 194TH LN  
SUNNY ISLES BEACH, FL 33160

**Current Mailing Address:**

44 WEST FLAGLER ST  
SUITE 2300  
MIAMI, FL 33130 US

**FEI Number:** 81-1091559

**Certificate of Status Desired:** No

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

EXCO US ATRIUM  
44 WEST FLAGLER ST  
SUITE 2300  
MIAMI, FL 33130 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:** ALINE DARMOUNI

02/01/2018

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title AMBR  
Name NAHMAN, PHILIPPE  
Address 3996 194TH LN  
City-State-Zip: SUNNY ISLES BEACH FL 33160

Title AMBR  
Name NAHMAN, CATHERINE  
Address 3996 194TH LN  
City-State-Zip: SUNNY ISLES BEACH FL 33160

Title AMBR  
Name COHEN, PASCAL  
Address 3996 194TH LN  
City-State-Zip: SUNNY ISLES BEACH FL 33160

*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:** NAHMAN , CATHERINE

AMBR

02/01/2018

Electronic Signature of Signing Authorized Person(s) Detail

Date