

LO1000008093

OFFICE USE ONLY (Document #)

Bissaleh on Collins, L.C.

(Requestor's Name)

17608 Collins Ave.

(Address)

North Miami Beach, FL

(City, State, Zip)

(Phone #)

33160

SP

MJH

OFFICE USE ONLY

CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known):

1. _____ (Corporation Name) _____ (Document #)
2. _____ (Corporation Name) _____ (Document #)
3. _____ (Corporation Name) _____ (Document #)
4. _____ (Corporation Name) _____ (Document #)

- ☐ Walk in ☐ Pick up time _____ ☐ Certified Copy
- ☐ Mail out ☐ Will wait ☐ Photocopy ☐ Certificate of Status

FILED
01 MAY - 9 PM 4:33
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

NEW FILINGS	
<input type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/ QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

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****160.00 ****160.00

125.00-CF
35.00-CC

Examiner's Initials

ARTICLES OF ORGANIZATION
OF
BISSALEH ON COLLINS, L.C
FLORIDA LIMITED LIABILITY COMPANY

The undersigned, desiring to form a Limited Liability Company pursuant to Florida Statutes Chapter 608 hereby state as follows:

ARTICLE I
Name

The name of the Limited Liability Company shall be Bissaleh on Collins, L.C..

ARTICLE II
Address

The mailing address and street address of the principal office of the Limited Liability Company is
17608 Collins Ave., North Miami Beach, FL 33160.

ARTICLE III
Registered Agent, Registered Office, & registered Agent's Signature

The name and the Florida street address of the registered agent are:
Osnat Turgeman
17608 Collins Ave.
North Miami Beach, FL 33160

Having been named as registered agent and to accept service of process for the above state limited liability company at the place designated in this certification, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provision 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 as provided for in Chapter 608, F.S.

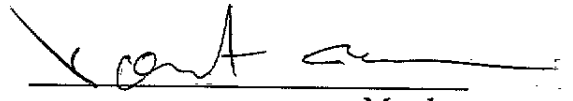


Registered Agent's Signature

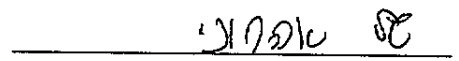
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ARTICLE IV
Management

The Limited Liability Company is to be managed by one manager or more managers and is, therefore, a member-managed company.


Member

Osnat Turgeman
Printed Name of Signature


Member

Gal Aharoni
Printed Name of Signature