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FILED
Jun 10, 2002 8:00 am
Secretary of State
05-12-2002 90609 014 ****50.00

LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # L01000017575

1. Entity Name
Flitsch & Bendayan, LLC
DBA F&B USA

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[redacted]

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2. Principal Place of Business	3. Mailing Address
21 SE 1st Avenue	same
Suite, Apt. #, etc. 6TH Floor	Suite, Apt. #, etc.
City & State Miami FL	City & State
Zip 33131 Country USA	Zip Country

4. FEI Number 90-0002489 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $5.00 Additional Fee Required

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7. Name and Address of Current Registered Agent

Name: Salomon Bendayan
Street Address (P.O. Box Number is Not Acceptable): 21 SE 1st Avenue 6TH Floor
City: Miami FL Zip Code: 33131

8. 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: S. Bendayan 5-31-2002
Signature, typed or printed name of registered agent and title if applicable. DATE

FEE IS $50.00
Make Check Payable to Department of State
DUE BY MAY 1

9. MANAGING MEMBERS/MANAGERS

TITLE President NAME Salomon Bendayan STREET ADDRESS 6760 SW 124TH Street CITY-ST-ZIP Pinecrest, FL 33156	TITLE NAME STREET ADDRESS CITY-ST-ZIP
TITLE Director of Operations NAME Ian Mikel Hagen STREET ADDRESS 3101 North Country Club Drive Apt 711 CITY-ST-ZIP Aventura, FL 33180	TITLE NAME STREET ADDRESS CITY-ST-ZIP
TITLE Director of Product Development NAME Alisa Bendayan STREET ADDRESS 9941 East Bay Harbor Drive PH O CITY-ST-ZIP Bay Harbour, FL 33154	TITLE NAME STREET ADDRESS CITY-ST-ZIP
TITLE Shareholder NAME Thomas Flitsch STREET ADDRESS Sachsenstr 32 CITY-ST-ZIP Pforzheim Germany 75177	TITLE NAME STREET ADDRESS CITY-ST-ZIP
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TITLE NAME STREET ADDRESS CITY-ST-ZIP
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11. I hereby certify that the information supplied with this filing does not qualify 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 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: Alisa Bendayan Alisa Bendayan 4-30-2002 (305)375-9500
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE — Date — Daytime Phone #