

# **2011 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L10000132305

**FILED**  
**Oct 03, 2011**  
**Secretary of State**

**Entity Name:** SAFI FOR DEAD SEA PRODUCTS LLC

**Current Principal Place of Business:**

5401 SOUTH KIRKMAN RD,  
SUITE 310  
ORLANDO,FL, 32819

**New Principal Place of Business:**

115 SOUTH FIELDING AVE  
TAMPA, FL 33606

**Current Mailing Address:**

2303 ANDREWS VALLEY DR  
KISSIMMEE ,FL, 34758

**New Mailing Address:**

2303 ANDREWS VALLEY DR,  
KISSIMMEE, FL 34758

**FEI Number:**

**FEI Number Applied For ( )**

**FEI Number Not Applicable (X)**

**Certificate of Status Desired (X)**

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

ZRAIQAT, SAFA  
2303 ANDREWS VALLEY DR  
KISSIMMEE, FL 34758 US

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

SAFA, ZRAIQAT  
2303 ANDREWS VALLEY DR  
KISSIMMEE, FL 34758 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: SAFA ZRAIQAT

10/03/2011

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: ZRAIQAT, TONY K  
Address: 2303 ANDREWS VALLEY DR  
City-St-Zip: KISSIMMEE, FL 34758

I hereby certify that the information indicated on this 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 608, Florida Statutes.

SIGNATURE: TONY ZRAIQAT

MGRM

10/03/2011

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date