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	(Requ	estor's Name)	
	(Addre	ess)	
	(Addre	ess)	
	(City/S	State/Zip/Phon	e #)
PICK-UF	>	☐ WAIT	MAIL
	(Busin	ess Entity Na	me)
	(Docu	ment Number	
Certified Copies		Certificate	s of Status
Special Instructions	s to Fili	ing Officer:	
,	A.	LUNT	-
	SEP	28 2011	

Office Use Only



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Zen SEP 26 PM 1): 34 SECRETARY DESTATE TALLAHASSEE. FLORIOZ

COVER LETTER

TO:

TO: Registration of	on Section Corporations			
SUBJECT: KA	SA 2010A LLC			
	Name of Limit	ted Liability Company		
The enclosed Article	es of Organization and fee(s) are	submitted for filing.		
Please return all corr	respondence concerning this mat	ter to the following:		
RAANA	N GAFRI			
		Name of Person	产品	
H.M.C.	LLC			SEP 26
***************************************		Firm/Company	ARY	26
20283	SR 7 suite #300		FO THE	2
		Address	ORID	2
Boca Ra	ton, Florida 33498	171.01		
coloc@4		ty/State and Zip Code		
sales@4	41realty.com E-mail address: (to be used	for future annual report notification)		
For further informati	on concerning this matter, please	e call:		
PAMELA POL	ANI	at (561) 504-4533		
Na	me of Person	Area Code & Daytime Telephone Nun	nber	
Enclosed is a check	k for the following amount:			
\$125.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	Certified Copy Certific (additional copy is enclosed) Certific	O Filing Fe cate of Stated Copy nal copy is en	us &
	Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street/Courier Address Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301		

ARTICLE I - Name:

The name of the Limited Liability Company is:

KASA 2010A LLC

(Must end with the words "Limited Limitity Company, "L.I.C.," or "LI.C.")

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address: Mailing Address: 20283 SR 7 suite 300 20283 SR 7 suite 300 Boca Raton, Florida 33498 Boca Raton, Florida 33498 email: sales@441realty.com email: seles@441realty.com

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: (The Limited Liability Company cames serve as in own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

The name and the Florida street address of the registered agent are:

GAFRI, RAANAN	
N	rine .
20283 SR 7 sui	ite 300
Florida street	address (P.O. Bax NOT acceptable)
BOCA RATON	FL 33498
City	, State, and Zip

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this vertificate, I haveby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions 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.

ure (REQUIRED)

(CONTINUED)

Page I of 2

"MGR." = Manager	Name and Address:		
"MGRM" = Managing Member			
MGRM-1%	SABER KARIM SALUM		
	MARISCAL LOPEZ 4304		
	ASCUNCION PARAGUAY		
MGRM-1%	DENISE MARIANNE RAPETTI		
•	MARISCAL LOPEZ 4304		
	ASCUNCION PARAGUAY		
MGR AND MGRM-98%	KASA 2010 LLC	24	111
	20283 SR 7 suite 300		-69
	Boca Raton, Florida 33498	一 全定	₽.
		52	26
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			歪
		25	* ************************************
(Use attachment if necessary)		3	3
FICLE V: Effective date, if other than th	e date of filing: (OP	TIONAL)	
in effective date is listed, the date must	be specific and cannot be more than five busin		ior
r 90 days after the date of filing.)	•		
•	201101 /2940		
REQUIRED SIGNATURE:	gree ally solver		
Signature of a memb	er or an authorized representative of a member.		

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)

SABER KARIM SALUM

Typed or printed name of signee

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

- \$ 30.00 Certified Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)

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