

L11000110787

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

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☐

MAIL

(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

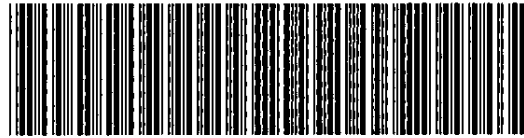
Special Instructions to Filing Officer:

A. LUNT

SEP 28 2011

EXAMINER

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TALLAHASSEE, FLORIDA

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## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: KASA 2010C LLC

Name of Limited Liability Company

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

RAANAN GAFRI

Name of Person

H.M.C. LLC

Firm/Company

20283 SR 7 suite #300

Address

BOCA RATON, FLORIDA 33498

City/State and Zip Code

sales@441realty.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Pamela Polani

Name of Person

at (561)

504-4533

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

☐ \$125.00 Filing Fee

☒ \$130.00 Filing Fee &  
Certificate of Status

☐ \$155.00 Filing Fee &  
Certified Copy  
(additional copy is enclosed)

☐ \$160.00 Filing Fee,  
Certificate of Status &  
Certified Copy  
(additional copy is enclosed)

**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

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TALLAHASSEE, FLORIDA

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**ARTICLE I - Name:**

The name of the Limited Liability Company is:

**KASA 2010C LLC**

(Must end with the words "Limited Liability Company," "L.L.C.," or "LLC.")

**ARTICLE II - Address:**

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

**Principal Office Address:**

20283 SR 7 suite #300  
Boca Raton, Florida 33498

**Mailing Address:**

20283 SR 7 suite #300  
Boca Raton, Florida 33498

**ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:**

(The Limited Liability Company cannot serve as its 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**

Name

**20283 SR 7 suite 300**

Florida street address (P.O. Box **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 certificate, I hereby 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.*

  
Registered Agent's Signature (REQUIRED)

(CONTINUED)

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NAME:

"MGR" = Manager

"MGRM" = Managing Member

NAME AND ADDRESS:

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  
20283 SR 7 suite 300  
Boca Raton, Florida 33498

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PALM HARBOR, FLORIDA

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(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: \_\_\_\_\_ (OPTIONAL)  
(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

REQUIRED SIGNATURE:



Signature of a member 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)