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| (Requestor's Name) |
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| PICK-UP WAIT MAIL |
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| Certified Copies Certificates of Status |
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| Special Instructions to Filing Officer: |
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JUN 27 2012

EXAMINER



FLORIDA DEPARTMENT OF STATE Division of Corporations

June 12, 2012

ITAI TSANAANI 1601 LENOX AVE # 9 MIAMI BEACH, FL 33139

SUBJECT: DANIEL LLC

Ref. Number: W12000031801

SECRETARY OF STEP

We have received your document for DANIEL LLC and your check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity. Section 608.406, Florida Statutes, was amended effective July 1, 2007, to require the name of a limited liability company to be distinguishable from the names of all other filings filed with the Division of Corporations, except for fictitious name registrations and general partnership registrations.

Please select a new name and make the correction in all the appropriate places. One or more words may be added to make the name distinguishable from the one presently on file. Adding of Florida or Florida to the end of the name is not acceptable. A search for name availability can be made on the Internet through the Division's records at www.sunbiz.org.

Please note the name of a limited liability company must end with the words "Limited Liability Company," the abbreviation "L.L.C.", or the designation "LLC". The word "Limited" may be abbreviated as "Ltd." andthe word "Company" may be abbreviated as "Co." The following suffixes are no longer acceptable: "Limited Company", "L.C.", and "LC".

The document number of the name conflict is P12000005489.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Deborah Bruce Regulatory Specialist II

Letter Number: 512A00016452

COVER LETTER

TO:

Registration Section

| Division of Corporations |
|---|
| SUBJECT: DANIEL AFR 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: |
| Itai Tsanaani |
| Name of Person |
| |
| Firm/Company |
| 1601 Lenox Ave #9 ♣5 |
| Address Address |
| |
| Miami Beach, FL 33139 |
| City/State and Zip Code |
| itai.tsanaani@gmail.com E-mail address: (to be used for future annual report notification) |
| De la companya de la |
| For further information concerning this matter, please call: |
| Itai Tsanaani 31,786 838-3114 |
| Name of Person Area Code & Daytime Telephone Number |
| |
| Enclosed is a check for the following amount: |
| \$125.00 Filing Fee \$\sum \$130.00 Filing Fee & \$\sum \$155.00 Filing Fee & \$\sum \$160.00 Filing Fee, Certificate of Status & Certificate of Status & |
| Certificate of Status Certified Copy Certificate of Status & (additional copy is enclosed) Certified Copy |
| (additional copy is enclosed) |
| Mailing Address Street/Courier Address |
| Pagistration Coation Pagistration Coation |

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

DANIEL AFR 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: | Mailing Address: | |
|---|--|---------------------|
| 1601 Lenox Ave # 9 Miami Beach, FL 33139 | 1601 Lenox Ave # 9 Miami Beach, FL 33139 | |
| | | • |
| ARTICLE III - Registered Agent, Register (The Limited Liability Company cannot serve as its own Rebusiness entity with an active Florida registration.) The name and the Florida street address of the ITAI TSANAANI | egistered Agent. You must designate an individual or and | ire: ₁₅₅ |
| Nai | me A | |
| 1601 Lenox A | ve # 9 | |
| Florida street | address (P.O. Box NOT acceptable) | |
| Miami Beach | _{FL} 33139 | |
| 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.

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

| ARTICI | LE I - N | lame: | | | |
|---------|----------|---------|------|---------------|-----|
| The nam | e of the | Limited | Liab | ility Company | is: |
| | | | | _ | |

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: | Mailing Address: | | |
|--|---|-----------------------------|------|
| 1601 Lenox Ave # 9 Miami Beach, FL 33139 | 1601 Lenox Ave # 9 Miami Beach, FL 33139 | | |
| | | | |
| ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Regist business entity with an active Florida registration.) The name and the Florida street address of the registration. | stered Agent. You must designate an individ Co | Signature (iii) or mothe | er-m |
| ITAI TSANAANI | LORIDA | ، ــ د د | Ö |
| Name | O _A | 6 | |
| 1601 Lenox Ave | e # 9 | | |
| Florida street add | dress (P.O. Box NOT acceptable) | | |
| Miami Beach | _{FL} 33139 | | |
| City, St. | ate, 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 obligative my position as registered agent as provided for in Chapter 608, F.S.

Registered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

| "MGR" = Manager "MGRM" = Managing Member | Name and Address: |
|--|---|
| MGR | ITAI TSANAANI |
| | 1601 Lenox Ave # 9 |
| | Miami Beach, FL 33139 |
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| (Use attachment if necessary) | |
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| CLE V: Effective date, if other than effective date is listed, the date mus 0 days after the date of filing.) REQUIRED SIGNATURE: Signature of a men | mber or an authorized representative of a member. 608.408(3), Florida Statutes, the execution of this document inder the negatives of periory that the facts stated herein are true. Information submitted in a document to the Department of State elony as provided for in s.817.155, F.S.) |

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