

## Florida Department of State

Division of Corporations **Electronic Filing Cover Sheet** 

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## FLORIDA LIMITED LIABILITY CO. SAFR Holdings USA, LLC.

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## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

**ARTICLE I - Name:** 

The name of the Limited Liability Company is:

SAFR Holdings USA, LLC.

ARTICLE II - Address:

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

2739 Hollywood Blvd. Hollywood, FL 33020

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

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

Jeffrey Holman 2739 Hollywood Blvd. Hollywood, FL 33020

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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2012 DEC -7 AN 8: 1 SECRETARY OF STAT ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager (MGR) or Managing Member (MGRM) is as follows:

Doron Ziv – 20% (MGRM) 2739 Hollywood Blvd, Hollywood, FL 33020

Kevin Frija – 20% (MGRM) 2739 Hollywood Blvd. Hollywood, FL 33020

Jeffrey Holman – 20% (MGRM) 2739 Hollywood Blvd. Hollywood, FL 33020 Benyamin Abehasera – 20% (MGRM) 2739 Hollywood Blvd. Hollywood, FL 33020

Jacob Levy – 10% (MGRM) 2739 Hollywood Blvd. Hollywood, FL 33020

Isaac Galazan – 10% (MGRM) 2739 Hollywood Blvd. Hollywood, FL 33020

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.)

Typed or printed name of signer

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