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To: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

ISG INVESTMENTS, LLC

Name:

Abraham Cherem Address: Abraham Cherem Mizrahi 885 Spinnaker Dr. W Hollywwod FL 33019

Phone Number:

(305) 343-0819

COVER LETTER

TO: Registration Section **Division of Corporations** ISG INVESTMENTS, 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: Abraham Cherem Name of Person Firm/Company 885 Spinnaker Dr. W Address Hollywood, FL 33019 City/State and Zip Code abraham@cherem.net E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Abraham Cherem Name of Person Enclosed is a check for the following amount: □ \$160.00 Filing Fee, □\$125.00 Filing Fee ■\$130.00 Filing Fee & □\$155.00 Filing Fee & Certificate of Status Certified Copy Certificate of Status & Certified Copy (additional copy is enclosed) (additional copy is enclosed) **Mailing Address** Street/Courier Address Registration Section Registration Section

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

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	;
SG Investments, LLC	
(Must end with the words "Limited Liab	ility Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the p	principal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
134 S. Dixie Highway Suite 105	134 S. Dixie Highway Suite 105
Hallandale Beach, FL 33009	Hallandale Beach, FL 33009
Hallandale Beach	registered agent are: REGISTATION OF TALL ANASSEE, TO THE PROPERTY OF THE PRO
•	•
liability company at the place designated in registered agent and agree to act in this capa all statutes relating to the proper and complete	o accept service of process for the above stated limited a this certificate, I hereby accept the appointment as acity. I further agree to comply with the provisions of the performance of my duties, and I am familiar with registered agent as provided for in Chapter 608, F.S

Page 1 of 2

(CONTINUED)

ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

Title:	Name and Address:
"MGR" = Manager "MGRM" = Managing Membe	ar.
MORM — Managing Memoc	4
MGRM	Abraham Cherem
	885 Spinnaker Dr. W
	Hollywood FL, 33019
	<u> </u>
(Use attachment if necessary)	
(Ose attachment if necessary)	\wedge
RTICLE V: Effective date, if other t	than the date of filing: (OPTIONAL)
f an effective date is listed, the dat	te must be specific and cannot be more than five business days
ior to or 90 days after the date of fi	
	AEC PEC
REQUIRED SIGNATURE:	SSEE -2
Signature of a	member or an authorized representative of a member.
(In accordance with sec	ction 608.408(3). Florida Statutes, the execution of this document
constitutes an affirmation of the constitutes an affirmation I am aware that any fals	on under the penalties of perjury that the facts stated herein are true. se information submitted in a document to the Department of State ee felony as provided for in s.817.155, F.S.)
Abraham Ch	
	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)