

15:03:29PM: Gerald M. Gerg No. 96 Pg. 1
LIS000082510
Florida Department of State

Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850) 617-6383

From:

Account Name : GERALD WEINBERG, P.C.
Account Number : I20030000043
Phone : (800)342-9856
Fax Number : (800)354-3381

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

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2015 MAY 11 AM 9:12
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

REC'D
15 MAY 11 AM 10:00
BUREAU OF COMMERCIAL
INFORMATION SERVICES

FLORIDA LIMITED LIABILITY CO.
RALME GROUP HOLLYWOOD LLC

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$125.00

May. 11. 2015 3:29PM

GERALD WEINGERG

No. 7496 P. 2

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

RALME GROUP HOLLYWOOD 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:

c/o MR. MOSHE EINAV

1032 HAZEL PLACE

WOODMERE, NY 11598

Mailing Address:

c/o MR. MOSHE EINAV

1032 HAZEL PLACE

WOODMERE, NY 11598

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:

MR. MOSHE EINAV

Name

19101 MYSTIC POINTE DRIVE, UNIT 3112

Florida street address (P.O. Box **NOT** acceptable)

AVENTURA

FL

33180

City

State

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 a registered agent, provided for in Chapter 605, F.S.

Moshe Einav
Registered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

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ARTICLE IV-

The name and address of each person authorized to manage and control the Limited Liability Company:

Title:

"AMBR" = Authorized Member

"MGR" = Manager

MGR**Name and Address:**MOSHE EINAV1032 HAZEL PLACEWOODMERE, NY 11598AMBRRAMI LEVY15 HAUMAN STREETJERUSALEM, ISRAEL 93420AMBRJOSEPH EINAV1032 HAZEL PLACEWOODMERE, NY 11598

(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.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.**ARTICLE VI:** Other provisions, if any.**REQUIRED SIGNATURE:****Signature of a member or an authorized representative of a member.**

(In accordance with section 605.0203 (1) (b), 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. 15.01.)

MOSHE EINAV

Typed or printed name of signer

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