## L17000008333

(Re	questor's Name)	
(Ad	dress)	
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Department of Stat.

Division of Corporations

Clifton Building 2661 Executive Center Drive Tallahassee, FL 32301

Reference: Bebo USA Holdings LLC

Florida Document Number: L15000151960

Dear Department:

It has come to our attention that our limited liability company Bebo USA Holdings LLC was dissolved administratively.

At this time I would like to release our document number L15000151960 as the authorized member of this limited liability company.

I am also submitting at this time articles that I am asking you to file on my behalf.

Thanking you for your assistance in getting these matters in order.

Sincerely,

arin Betrandet

Aviv Behrendt, Managing Member

ELANASSEE, FLORD

## **COVER LETTER**

	Registration Section Division of Corporations		
SUBJEC'	BEBO USA Holdings, LLC		
SUBJEC	Name o	f Limited Liabil	ity Company
The enclo	sed Articles of Organization and fee(	s) are submitted	for filing.
Please ret	urn all correspondence concerning th	is matter to the f	following:
	Linda Lepore		
		Name of	Person
	Caloosehatche Tax .		
		Firm/Co	ompany
	709 Cape Coral Pkwy W		
		Addr	ress
	Cape Coral, FL 33914		
	linda.lepore@ctfs.us	City/State ar	nd Zip Code
	E-mail address: (to be	used for future	annual report notification)
For further	information concerning this matter, p	lease call:	
	Lina Lepore	239 at (	540-2612
	Name of Person	Area Code	Daytime Telephone Number
Enclosed	is a check for the following amount:		
	Filing Fee \$130.00 Filing Fee Certificate of Statu	s LCertif	00 Filing Fee & \$160.00 Filing Fee, lied Copy lal copy is enclosed) Certificate of Status & Certified Copy (additional copy is enclose
	Mailing Address New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Street Address New Filing Section Division of Corporations Clifton Building 2661 Executive Center Circle
	i diidiidSSEE, I'L 32314		Tallahassee, FL 32301

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

BEBO USA Holdin			
(Must end	with the words "Limited	Liability Company	"L.L.C.," or "LLC.")
ARTICLE II - Address:			
The mailing address and street a	address of the principal of	fice of the Limited	Liability Company is:
<u>Princi</u>	oal Office Address:		Mailing Address:
709 Cape Coral Pkv	vy W	709	Cape Coral Pkwy W
Comp Compl. Et. 220			
The Limited Liability Compan	gent, Registered Office, &	& Registered Agent. N	
ARTICLE III - Registered Ag (The Limited Liability Compan another business entity with an The name and the Florida street	gent, Registered Office, & y cannot serve as its own I active Florida registration address of the registered	& Registered Agen Registered Agent. V	t's Signature:
ARTICLE III - Registered Ag (The Limited Liability Compan another business entity with an	gent, Registered Office, & y cannot serve as its own I active Florida registration	& Registered Agen Registered Agent. V	t's Signature:
ARTICLE III - Registered Ag (The Limited Liability Compan another business entity with an	gent, Registered Office, & y cannot serve as its own I active Florida registration address of the registered Lawrence Swan	& Registered Agent. Value of the control of the con	t's Signature:
ARTICLE III - Registered Ag (The Limited Liability Compan another business entity with an	gent, Registered Office, & y cannot serve as its own I active Florida registration address of the registered	Registered Agent. Value agent are:  Name	t's Signature: ou must designate an individua
ARTICLE III - Registered Ag (The Limited Liability Compan another business entity with an	gent, Registered Office, & y cannot serve as its own I active Florida registration address of the registered Lawrence Swan  709 Cape Coral Pkwy	Registered Agent. Value agent are:  Name	t's Signature: ou must designate an individua

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 605, F.S..

Registered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

JAN 12 AM 10: 50

## ARTICLE IV-

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

"AMBR" = Authorized Member	Name and Address:	
"MGR" = Manager	A ' D I I	
AMBR	Aviv Behrendt	
	709 Cape Coral Pkwy W	
	Cape Coral, FL 33914	
AMBR	Ben Ami Behrendt	
	709 Cape Coral Pkwy W	
	Cape Coral, FL 33914	
AMBR	Eyai Borman	
AWIDK	709 Cape Coral Pkwy W	
	Cape Coral, FL 33914	
	Cape Corai, FL 33914	
<del></del>		
(Use attachment if necessary)		
(Ose attachment if necessary)		
CLEV: Effective date, if other than the da	ate of filing: (OPTIONAL)	
•	nt of State's records.	
CLE VI: Other provisions, if any.		
REOUIRED SIGNATURE:		
REQUIRED SIGNATURE:	Behrnott	
REQUIRED SIGNATURE:	Behandt member or an authorized representative of a member.	
REQUIRED SIGNATURE:  Signature of a  This document is exe I am aware that any fa	member or an authorized representative of a member. cuted in accordance with section 605.0203 (1) (b), Florida Statutes. alse information submitted in a document to the Department of State	
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