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# COVER LETTER

	w Filing Section vision of Corporations		
SUBJECT:	American	Future Homes, LLC	
	Name of L	imited Liability Company	
The enclosed	d Articles of Organization and fee(s) a	are submitted for filing.	
Please return	all correspondence concerning this n	natter to the following:	
_		Meir Yaniv	· <del></del>
		Name of Person	
-	Ame	rican Future Homes, LLC	,
		Firm/Company	
-	8484	Wilshire Blvd, Suite 630	
		Address	
-		everly Hills, CA 90211	
		City/State and Zip Code hiroyaniv@gmail.com	
_	E-mail address (to be use	d for future annual report notificat	ion)
For further inf	ormation concerning this matter, plea	se call:	
_	Gary H. Edelstone at (	310 ) 552-18	19
	Name of Person	Area Code Daytime Telephon	e Number
Enclosed is a	a check for the following amount:		
\$125.00 Fili	ng Fee \$130.00 Filing Fee & Certificate of Status	\$155,00 Filing Fee & Certified Copy (additional copy is enclosed)	\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Address New Filing Section	Street Address New Filing Section	
	Division of Corporations P.O. Box 6327	Division of Corporati Clifton Building	ions
	Tallahassee, FL 32314	2661 Executive Center Tallahassee, FL 3230	

### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

2521 JUN -1 AH 9: 25

ARTICLE 1 - Name:	zazi Ju
The name of the Limited Liability Company is:	ird (
American Future Homes LLC	
(Must contain 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:

4830 W Kennedy Blvd, Suite 600	4830 W. Kennedy Blvd, Suite 600
Tampa	Tampa
FL 33609	FL 33609

## 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:

COGEN	ICY GL	OBAL INC.	
Na	ine		<u> </u>
115 North C	alhour	Street, Suit	e 4
Florida street address (P.	O. Box	NOT accepta	ble)
Tallahassee		Florida	32301
City	State		Zip

Having been named as registered agent and to accept service of process for the above stated limited hability 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)

Title:		Name and Address:
"AMBR" = A	uthorized Member	
"MGR" = Ma	_	
MGF	₹	Javier Parra Zavarce
		8112 Pond Shadow Ln
		Tampa, FL 33635
MGF	₹	Meir Yaniv
	·.	8484 Wilshire Blvd., Suite 630
		Beverly Hills, CA 90211
LEV: Effective		ate of filing (OPTIONAL)
LEV: Effective ffective date is less of filing.)	e date, if other than the da isted, the date must be	specific and cannot be more than five business days prior to or 90 days
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ARTICLE IV-

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