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To: Division of Corporations
Fax Number : (850)617-6381

From: Account Name : ALEXANDER ALMONTE, ESQ/I INCORPORATE LTD.
Account Number : I20070000019
Phone : (518)689-1212
Fax Number : (518)432-0742

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

Email Address: _____

**FLORIDA LIMITED LIABILITY CO.
SAIF 21, LLC**

Certificate of Status	1
Certified Copy	0
Page Count	01
Estimated Charge	\$130.00

Articles of Organization
for
Florida Limited Liability Company

ARTICLE I NAME

The name of the Limited Liability Company is:

SAIF 21, LLC

ARTICLE II PRINCIPAL OFFICE

The mailing address and street address of the principal office is:

6442 NW 31st Ter, Boca Raton, FL 33496

ARTICLE III REGISTERED AGENT, REGISTERED OFFICE & REGISTERED AGENT'S SIGNATURE

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

**Alla Tsimerman
6442 NW 31st Ter, Boca Raton, FL 33496**

ARTICLE IV AUTHORIZED REPRESENTATIVE / MANAGER

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

**Alla Tsimerman, Authorized Member
6442 NW 31st Ter, Boca Raton, FL 33496**

**Igor Tsimerman, Authorized Member
6442 NW 31st Ter, Boca Raton, FL 33496**

June 7, 2021

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..

**s/ Alla Tsimerman
Alla Tsimerman
Registered Agent**

This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. 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.

**s/ Alla Tsimerman
Alla Tsimerman
Authorized Member**

**s/ Igor Tsimerman
Igor Tsimerman
Authorized Member**

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