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(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
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Special Instructions to Filing Officer:
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Office Use Only



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SECRETARY OF STATE



November 7, 2024

ROI TURGEMAN, EA 701 BRICKELL AVE SUITE #1550 MIAMI, FL 33131 US

SUBJECT: REMILIA HAIR LLC Ref. Number: W24000150982

We have received your document for REMILIA HAIR LLC and check(s) totaling \$150.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

Only non-United States entities may become a domestic limited liability company as stated in section 605.1052, Florida Statutes. You may want to explore one of the conversion options. Please return to our website sunbiz.org to download the appropriate form.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Matthew H Hitchcock Regulatory Specialist II

24 HOY -1 AM 4: 58

Letter Number: 824A00024535

SYNON STORAGONS



RECEIVED

FLORIDA DEPARTMENT OF STATE Division of Corporations TALLAHASSEE, FL

November 7, 2024

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ROI TURGEMAN, EA 701 BRICKELL AVE SUITE #1550 MIAMI, FL 33131 US

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Matthew H Hitchcock Regulatory Specialist II

Letter Number: 824A00024535



FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

Attached is a form to convert an "Other Business Entity" into a "Florida Limited Liability Company" pursuant to section 605.1045, Florida Statutes. These forms are basic and may not meet all conversion needs. The advice of an attorney is recommended.

Pursuant to s. 605.0102(23)a, F.S., entity means: a business corporation, a nonprofit corporation, a general partnership, including a limited liability partnership, including a limited partnership, including a limited liability limited partnership; a limited liability company; a real estate investment trust; or any other domestic or foreign entity that is organized under an organic law.

Filing Fees: \$150.00 (\$25 for Articles of Conversion and

\$125 for Articles of Organization)

Certified Copy (optional): \$30.00

Certificate of Status (optional): \$5.00

Send one check in the total amount payable to the Florida Department of State.

Please include a cover letter containing your telephone number, return address and certification requirements, or complete the attached cover letter.

Mailing Address:

New Filing Section
Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314

Street Address:

New Filing Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

For further information, you may contact the New Filing Section at (850) 245-6052.

Important Notice: As a condition to the conversion, pursuant to s.605.0212(9), F.S., each party to the conversion must be active and current through December 31 of the calendar year this document is being submitted to the Department of State for filing.

INHS11 (7/17)

COVER LETTER

то:	New Filing S Division of C				
SUB.	JECT: Remilia	Hair LLC			
		(Name of Re	sulting Florida Lim	ited Cor	mpany)
The e Busin	nclosed Article less Entity" into	es of Conversion. Artic o a "Florida Limited L	les of Organizatiability Compan	tion, ar y⊓in a	nd fees are submitted to convert an "Other accordance with s. 605.1045, F.S.
Please	e return all corr	respondence concernin	g this matter to:		
Roi Ti	urgeman, EA				
		(Contact Person)		-	
Rotma	ar Grp Inc				
	<u>,</u>	(Firm/Company)		_	
701 B	rickell Ave Suite	#1550			
		(Address)		_	
Miami	, FL 33131				
	(City, State and Zip Code)		_	
ROI@	rotmargrp.com				
E-r	nail Address: (to b	e used for future annual re	port notifications)	_	
For fu	irther informati	on concerning this ma	tter, please call:		
Roi Tu	urgeman, EA		_at (,705-6	6475
	(Name of Conta	ect Person)	(Area Code) (Day	rtime Telephone Number)
Enclo dollar	sed is a check f s and drawn on	or the following amou a bank located in the	mt: (All checks United States)	procesi	sed by this office must be payable in US
(\$25 fo & \$125	0.00 Filing Fees or Conversion 5 for Articles anization)	☐\$155.00 Filing Fees and Certificate of Status	□\$180.00 Filing and Certified Co		☐\$185.00 Filing Fees, Certified Copy, and Certificate of Status
	Mailing Add New Filing S Division of C P.O. Box 632 Tallahassee, I	ection orporations 7		New I Divisi The C	t Address: Filing Section ion of Corporations Jentre of Tallahassee N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Conversion For "Other Business Entity" Into

Florida Limited Liability Company

The Articles of Conversion <u>and attached Articles of Organization</u> are submitted to convert the following "Other Business Entity" into a Florida Limited Liability Company in accordance with s.605.1045, Florida Statutes.

1. The name of the "Other Business Entity" immediately prior to the filing of the Articles of Conversion is: Remilia Hair ELC
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a Limited Liability Company (Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)
(Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, etc.)
First organized, formed or incorporated under the laws of
(Enter state, or if a non-U.S. entity, the name of the country)
01/06/2017 on .
(date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization:
Remilia Hair LLC
(Enter Name of Florida Limited Liability Company)
4. If not effective on the date of filing, enter the effective date:
The effective date: Cannot be prior to date of receipt or filed date nor more than 90 calendar days after
the date this document is filed by the Florida Department of State.) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the locument's effective date on the Department of State's records.
5. The plan of conversion has been approved in accordance with all applicable statutes.

6. The "Converted or Other Business Entity" has agreed to pay any members having appraisal rights the amount to which such members are entitled under ss. 605,1006 and 605,1061-605,1072, F.S.

Signed this 11 day of December	
Signature of Authorized Representative of Lim	ited Liability Company:
	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\
Signature of Authorized Representative:	
Signature of Authorized Representative:	Title: Accountant
Signature(s) on behalf of Other Business Entity:	See below for required signature(s)
Signature: Cliran Cuzo	\cap
Printed Name: Eliran Luzon	Title: Member-Manager
Signature:	
Printed Name:	Title:
Signature:	
Signature: Printed Name:	Title:
Signaturo:	
Signature:Printed Name:	Title
Frince Name.	
Signature:	
Printed Name:	Title:
Signature:	
Printed Name:	Title:
If Florida Corporation:	
Signature of Chairman, Vice Chairman, Director, or	Officer
If Directors or Officers have not been selected, an In	
	voi portuor musi sign.
<u>lf Florida General Partnership or Limited Liabili</u>	ty Partnership:
Signature of one General Partner.	
If Florida Limited Partnership or Limited Liabili	ty_Limited Partnership:
Signatures of ALL General Partners.	
All others:	
Signature of an authorized person.	
F • • • • • • • • • • • • • • • • • • •	
Fees:	
Articles of Conversion:	\$25.00
Fees for Florida Articles of Organization:	\$125.00
Certified Copy:	\$30.00 (Optional)
Certificate of Status:	\$5.00 (Optional)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

	ed Liability Company i	is:
	. , ,	
Remilia Hair LLC		
(Must co	(Must contain the words "Limited Liability Company, "E.L.C.," or "ELC.") RTICLE II - Address: e mailing address and street address of the principal office of the Limited Liability Company is: incipal Office Address: Mailing Address: 1 Brickell Ave Suite #1550 1367 N Alta Vista Blvd #402	
ARTICLE II - Addre	288:	
The mailing address as	nd street address of the	principal office of the Limited Liability Company is:
Principal Office Add	ress:	Mailing Address:
701 Brickell Ave Suite #1550		1367 N Alta Vista Blvd #402
Miami, FL 33131		Los Angeles, CA 90046
The Limited Liability Compa business entity with an activ The name and the Flor	iny cannot serve as its own Reg e Florida registration.) rida street address of the	gistered Agent. You must designate an individual or another
Ro		
	Nar	ne
		
F	lorida street address (P.	O. Box NOT acceptable)
Mia	ami	FL ³³¹³¹
	City	
liability company registered agent and statutes relating to	at the place designated agree to act in this cape the proper and complete tions of my position as r	in this certificate. I hereby accept the appointment as acity. I further agree to comply with the provisions of all e performance of my duties, and I am familiar with and
	(CONTI	NUED)

•	•	777	177		7 7	
A	ĸ	LI	C.	LE	1	\ -

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

<u>Title:</u>	Name and Address:
"AMBR" = Authorized Member	
"MGR" = Manager	
AMBR	Eliran Luzon
AWDIX	Yoram Kaniuk 3 St Apt 36
	Tel Aviv, Israel 6712249
	161 AVIV, 131861 07 12243
(Use attachment if necessary)	
(Ose academicin in necessary)	
LE V: Other provisions, if any.	
7515 V. Other provisions, it any.	
REQUIRED SIGNATURE:	
$\overline{\mathcal{L}}$	
Elinan Curro	\cap
Signature of a member or	an authorized representative of a member
This document is executed in accordance	with section 605.0203 (1) (b), Florida Statutes, I am aware
 any false information submitted in a docu 	iment to the Department of State constitutes a third degree fe
as provided for in s.817.155, F.S.	

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)



Secretary of State Certificate of Status

I, SHIRLEY N. WEBER, PH.D., California Secretary of State, hereby certify:

Entity Name: REMILIA HAIR LLC Entity No.: 201701910503

Registration Date: 01/06/2017

Entity Type: Limited Liability Company - CA

Formed In: CALIFORNIA

Status: Active

The above referenced entity is active on the Secretary of State's records and is authorized to exercise all its powers, rights and privileges in California.

This certificate relates to the status of the entity on the Secretary of State's records as of the date of this certificate and does not reflect documents that are pending review or other events that may impact status.

No information is available from this office regarding the financial condition, status of licenses, if any, business activities or practices of the entity.



IN WITNESS WHEREOF, I execute this certificate and affix the Great Seal of the State of California this day of October 28, 2024.

SHIRLEY N. WEBER, PH.D.

Secretary of State

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FILED STATE OF STATE

Certificate No.: 260678931

To verify the issuance of this Certificate, use the Certificate No. above with the Secretary of State Certification Verification Search available at **biz**fileOnline.sos.ca.gov.



Secretary of State Articles of Organization Limited Liability Company (LLC)

LLC-1

201701910503

Secretary of State 16 State of California

JAN 0 6 2017

IMPORTANT — Read Instructions before completing this form.

Filing Fee - \$70.00

Copy Fees -First plain copy free; Additional copies: First page \$1,00 & .50 for each attachment page; Certification Fee - \$5.00

Importanti LLCs may have to pay an annual minimum \$800 tax to the California Franchise Tax Board. For more information, go to https://www.ftb.ca.gov.

رک

This Space For Office Use Only

1. Limited Liability Company Name (See Instructions - Must contain an LLC ending such as LLC or L	LC.	"LLC" WI	be edded,	if not inc	luded.)
REMILIA HAIR LLC					

2. Business Addresses

a Initial Street Address of Designated Office in California - Do not list a P.O. Box	City (no abbreviations)	State	Zip Code
350 S FULLER AVE APT 93	LOS ANGELES	CA	90036
b. 'নাইড়া Mailing Address of LLC, if different then item ?a	City (no abbroviations)	State	Zip Code
	1	1	, ,

3. Agent for Service of Process

ttem 3a and 3b; If naming an individual, the agent must reside in California and tiem 3a and 3b must be completed with the agent's name and complete California street address.

Item 3c: If naming a California Registered Corporate Agent, a current agent registration certificate must be on file with the California Secretary of State and Item 3c must be completed (leave Item 3a-3b binnk)

		,	Last Name		
MOSHE	{	PALGIR			
b. Sirent Address (il agent is not a corporation) - Do not list a P.O. Box	CRy (no abbreviations)	 -	State	To Code	
350 S FULLER AVE APT 9J	LOS ANGELES		CA	90036	
c, California Registered Corporate Agent's Name (if agent is a comporation) - Do not o	complete Item 3n or 3b		L	<u> </u>	

The LLC will be managed by: One Manager More than One Manager All LLC Member(s)

5. Purpose Statement (Do not after Purpose Statement)

The purpose of the limited flability company is to engage in any lawful act or activity for which a limited flability company may be organized under the California Revised Uniform Limited Liability Company Act.

The Information contained herein, including in any attachments, is true and correct.

Organizer sign here

MOSHE PALGIR

Print your name here

LLC-1 (REV 08/2016)

2016 Calfornia Secretary of State www.sos.ca.gov/business/be