(1/5)

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Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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(((H130001861043)))



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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone : (850)222-1092 Fax Number : (050)878-5368

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

Email Address:

Foreign Limited Liability Company ILDA Group, LLC

Certificate of Status	0	
Certified Copy	0	
Page Count	05	
Estimated Charge	\$125,00	

Electronic Filing Menu

Corporate Filing Menu

Methors AIR 2 9 2013

CR2E027 (9/1	0)	COVER LETTER	
	gistration Section vision of Corporations		
SIIR IPCT	ILDA Group, LLC		
SUBJECT		Name of Limited Liability Company	
The enclose Existence, s	ed "Application by Foreign Limited Lind check are submitted to register the	iability Company for Authorization to Transact Bus above referenced foreign limited liability company	iness in Florida," Certificate of to transact business in Florida
Please retur	n all correspondence concerning this	matter to the following:	
	Joy Schroeder		
		Name of Person	
	NRAI Corporate Services		
		Firm/Company	
	1021 Main Street, Suite 1150		
•		Address	
	Houston, TX 77002		0 7: a
		City/State and Zip Code	
	jschroeder@nrai.com		
	E-mail address	s: (to be used for future annual report notification)	SS 2
For further	information concerning this matter, p	lease call;	THE STATE
Jo	y Schroeder	800 862-543B	EG 🛥 gum
	Name of Person	Area Code & Daytime Telephone Number	
M.	AILING ADDRESS:	STREET ADDRESS:	D
	vision of Corporations	Division of Corporations	
	gistration Section	Registration Section	
	D. Box 6327	Clifton Building	
Ta	llahassee, FL 32314	2661 Executive Center Circle Tallahassee, FL 32301	
Enclosed	is a check for the following am	ount:	
	\$125.00 Filing Fee	ling Fee & 🔲 \$155.00 Filing Fee & 🔲 \$160	.00 Filing Fee, Certificate
	Certificate	of Status Certified Copy of St	atus & Certified Copy

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN LI	I COMPLIANCE WITH SECTION BURSUS, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN MITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:
1.	ILDA Group, LLC
	(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")
ÇO	f name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written insent of the managers or managing members adopting the alternate name. The alternate name must include "Limited Liability ompany," "L.L.C," "LLC.")
	Nevada 3. 26-2183766
	(Jurisdiction under the law of which foreign limited liability (FEI number, if applicable) company is organized)
4.	
	(Date of Organization) (Duration: Year limited liability company will cease to exist or "perpetual")
6.	
	(Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)
7.	8676 Hawkwood Bay Drive
	Boynton Beach, Florida 33473
	(Street Address of Principal Office)
8.	If limited liability company is a manager-managed company, check here \(\sum \)
9.	The name and usual business addresses of the managing members or managers are as follows:
	Eyal Halcvy, Manager - 8676 Hawkwood Bay Drive, Boynton Beach, Florida 33473
	om 4- A
10	Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in purisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a
tres	nslation of the certificate under oath of the translator must be submitted.)
11	. Nature of business or purposes to be conducted or promoted in Florida:
	Any legal purpose except banking and insurance
	EHZ_
	Signature of a member or an authorized representative of a member.
	(In accordance with section 608.408(3), F.S., 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.817.155, F.S.)
	Eyal Halovy, Manager
	Typed or printed name of signee

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

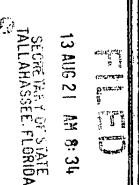
ILDA Group, If unavailable		ed in the state of Florida is:			
2. The name	e and the Florida street a	address of the registered agent and office are	:		
		NRAI Services, Inc.			
		(Name)	## ## ## ## ## ## ## ## ## ## ## ## ##		
		1200 South Pine Island Road	TALL SE	ن تن	
Florida Street Address (P.O. Box NOT ACCEPTABLE)			I 3 AUG 2	. TYNGU	
	Plantation	FL 33324	NSSA.	321	ig Specimen Generalis
		City/State/Zip		700	in and the
liability compregistered ag statutes relat	pany at the place d <mark>esig</mark> nt sent and agree to act in t ling to the proper and co	ent and to accept service of process for the a ated in this certificate, I hereby accept the ap his capacity. I further agree to comply with mplete performance of my duties, and I am f as registered agent as provided for in Chapt	bove stated limited oppointment of the provisions of all amiliar with and	§: 34	recinic Veneral

\$ 100.00 Filing Fee for Application
\$ 25.00 Designation of Registered Agent
\$ 30.00 Certified Copy (optional)
\$ 5.00 Certificate of Status (optional)

Joy Schroeder, Asst. Secretary

SECRETARY OF STATE





CERTIFICATE OF EXISTENCE WITH STATUS IN GOOD STANDING

I, ROSS MILLER, the duty elected and qualified Nevada Secretary of State, do hereby certify that I am, by the laws of said State, the custodian of the records relating to filings by corporations, non-profit corporations, corporation soles, limited-liability companies, limited partnerships, limited-liability partnerships and business trusts pursuant to Title 7 of the Nevada Revised Statutes which are either presently in a status of good standing or were in good standing for a time period subsequent of 1976 and am the proper officer to execute this certificate.

I further certify that the records of the Nevada Secretary of State, at the date of this certificate, evidence, ILDA GROUP, LLC, as a limited liability company duly organized under the laws of Nevada and existing under and by virtue of the laws of the State of Nevada since February 29, 2008, and is in good standing in this state.

Electronic Certificate
Certificate Number: C20130821-0092
You may verify this electronic certificate
online at http://www.nvsos.gov/

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office on August 21, 2013.

ROSS MILLER
Secretary of State