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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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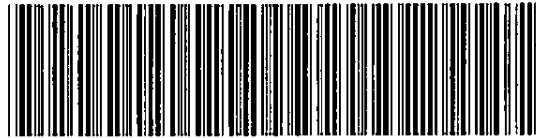
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

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2025 JUL 19 AM 9:15

JUL 17 2025

K. Brumley

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: INVERSIONES SAMEKH LIMITADA, LLC
Name of Limited Liability Company

The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida.

Please return all correspondence concerning this matter to the following:

Efraim Saragovia
Name of Person
United Company
3500 North 55th Ave
Address
Hollywood, FL 33021
City/State and Zip Code
saragovia@aol.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Efraim Saragovia 305 538-0643
at ()
Name of Contact Person Area Code Daytime Telephone Number

Mailing Address:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Enclosed is a check for the following amount:

Please make check payable to: **FLORIDA DEPARTMENT OF STATE**

☐ \$125.00 Filing Fee ☒ \$150.00 Filing Fee & ☐ \$155.00 Filing Fee & ☐ \$160.00 Filing Fee, Certificate
Certificate of Status Certified Copy of Status & Certified Copy

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

IN COMPLIANCE WITH SECTION 605.092, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY
COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. INVERSIONES SAMEKH LIMITADA, LLC

(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "LLC," or "LLC.")

(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Liability Company," "LLC," or "LLC.")

San Jose, Costa Rica

not applicable

2. (Jurisdiction under the law of which foreign limited liability company is organized)

3. (If number, if applicable)

not applicable

4. (Have you transacted business in Florida, if prior to registration?
If yes, sections 605.0901 & 605.0902, F.S., to determine penalty liability)

3500 North 55th Ave

3500 North 55th Ave.

5. (Street Address of Principal Office)

6. (Mailing Address)

Hollywood, FL 33021

Hollywood, FL 33021

7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: Eilam Saragovitz

Office Address: 3500 North 55th Ave

Hollywood, Florida 33021
(City) (Zip code)

Registered agent's acceptance:

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 application, 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 relative to the proper and complete performance of my duties, and I am familiar with
and accept the obligations of my position as registered agent.

(Registered agent's signature)

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AND
FILED

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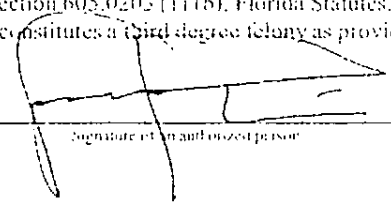
8. For initial indexing purposes, list names, title or capacity and addresses of the primary members/managers or persons authorized to manage [up to six (6) total]:

<u>Title or Capacity:</u>	<u>Name and Address:</u>	<u>Title or Capacity:</u>	<u>Name and Address:</u>
☒ Manager	Name: <u>Efraim Saragovia</u>	☐ Manager	Name: _____
☐ Member	Address: <u>3500 North 55th Avenue</u>	☐ Member	Address: _____
☒ Authorized Person	<u>Hollywood, FL 33021</u>	☐ Authorized Person	_____
☐ Other	<u>Efraim Saragovia</u>	☐ Other	_____
☐ Other	<u>_____</u>	☐ Other	<u>_____</u>
☐ Manager	Name: _____	☐ Manager	Name: _____
☐ Member	Address: _____	☐ Member	Address: _____
☐ Authorized Person	_____	☐ Authorized Person	_____
☐ Other	<u>_____</u>	☐ Other	<u>_____</u>
☐ Other	<u>_____</u>	☐ Other	<u>_____</u>
☐ Manager	Name: _____	☐ Manager	Name: _____
☐ Member	Address: _____	☐ Member	Address: _____
☐ Authorized Person	_____	☐ Authorized Person	_____
☐ Other	<u>_____</u>	☐ Other	<u>_____</u>
☐ Other	<u>_____</u>	☐ Other	<u>_____</u>

Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed individuals may be added to the index when filing your Florida Department of State Annual Report form.

9. Attached is a certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted.)

10. 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. 317.155, F.S.



 Signature of authorized person
 Efraim Saragovia

 Printed name of signor

TRANSLATOR'S CERTIFICATE OF ACCURACY

Pursuant to U.S. Federal Regulation 32 FR 1900 January 13, 1964 and 333, regarding translation of documents, I **RICARDO CASTRO** hereby certify that I am competent to translate this document **NOTARY CERTIFICATION** relative to **INVERSIONES SAMEKH, LIMITADA**, and that this translation is true, complete and accurate to the best of my knowledge and belief. No inference or determination regarding the validity of the source document or its content is made.

This is to certify the correctness of the translation of **RICARDO CASTRO** as a translator, liable for the way in which the translation is used by the customer or any third party, including endorsement of the translation.

Translation: Spanish to English

The total number of pages: 2 (two)

CERTIFICADO DE EXACTITUD DEL TRADUCTOR

De conformidad con la Regulación Federal de los Estados Unidos (32 FR 1900 13 de enero de 1964 y 333) con respecto a la traducción de documentos, yo **RICARDO CASTRO** por la presente certifico que soy competente para traducir este documento **CERTIFICACION** relativa a **INVERSIONES SAMEKH, LIMITADA**, y que esta traducción es verdadera, completa y precisa a mi leer, saber y entender. No se hace ninguna inferencia o determinación sobre la validez del documento fuente o su contenido.

Esto es para certificar la exactitud de traducir un documento **RICARDO CASTRO** no asume ninguna responsabilidad por la forma en que el cliente o cualquier tercero utilice la traducción, incluidos los usos no legales de la traducción.

Traducción: Español al Inglés

Número total de páginas traducidas: (025)

RICARDO CASTRO

Translator

18400 NW 75 PL, Suite B-4, Miami, FL 33185

Ph: 786 955.4444

STATE OF FLORIDA

COUNTY OF MIAMI-DADE

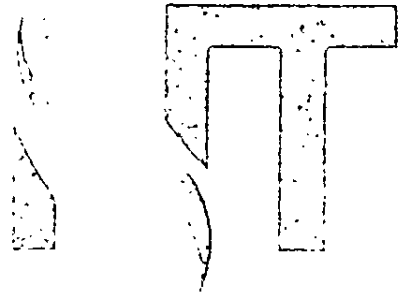
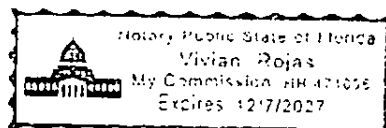
The foregoing instrument was acknowledged before me, Vivian Rojas, in my physical presence OR () online notarizations (starting July 1st of July 2025), by **RICARDO CASTRO**.

Personally known (X) OR reduced identification ()

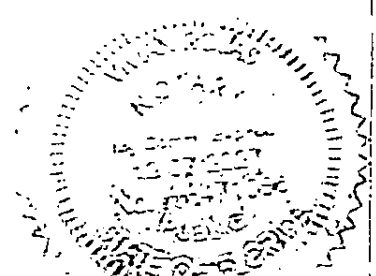
Vivian Rojas

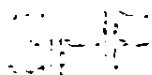
Vivian Rojas

Florida Notary



TRANSLATORS





TOBIAS FELIPE MURILLO JIMENEZ
1 1 2 2 2 0 8 4 7

QR
CODE

TOBIAS FELIPE MURILLO JIMENEZ
NOTARY PUBLIC OF SAN JOSE

CERTIFIES: Based on the Corporations Registry, mechanized system number three-hundred two-hundred sixty-nine thousand four hundred sixty-three: i) **INVERSIONES SAMEKH, LIMITADA** legal entity identification number three-hundred two-hundred sixty-nine thousand four hundred sixty-three, with registered office at San Jose, San Jose Mata Redonda, Sabana Norte, Avenida Las Americas, Torres del Parque Building, Third Floor, UHP Abogados, is duly registered and active; ii) That its capital stock is FOUR THOUSAND COLONES, represented by four registered shares of one thousand colones each fully subscribed and paid. Having reviewed the duly legalized stock ledger kept by the company, it is attested that the shares comprising the company's capital belong in their entirety to SARAGOVIA CR INVESTMENTS, LLC, a company incorporated and governed by the regulations of the State of Florida, United States of America, identification number L two three zero zero zero two three eight eight five three, domiciled at four six five one Sheridan Street, Suite three hundred two, Hollywood, FL three three zero two one. Likewise, as recorded in the documentation of said company, which I consider truthful, its entire capital stock belongs to SARAGOVIA DOS MIL VEINTITRES FAMILY IRREVOCABLE TRUST, a Trust established, valid and governed by the regulations of the United States of America, with Tax identification number ninety-three- six four zero two eight three five, likewise, after having viewed the trust agreement, it is attested that said Trust has as its sole principal beneficiary MARTHA PRAGIER SARAGOVIA, holder of United States passport number four eight eight eight eight two six zero four. The entries have been certified for all relevant purposes. What is omitted does not modify, alter condition, restrict or distort what is transcribed -----

IN COMPLIANCE, - I issue this certificate number
one hundred one-two thousand twenty-five

TOBIAS FELIPE MURILLO JIMENEZ



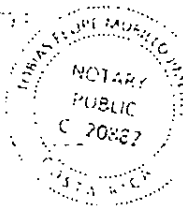
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Paid

at the request of the interested party, in the city of
San Jose at twelve o'clock on July seventh, two
thousand twenty-five Tax stamps were affixed and
cancelled.

ALTERNATE TELLER #4



Illegible Signature





34

TOBIAS FELIPE MURILLO JIMENEZ

NOTARIO PUBLICO DE SAN JOSÉ

CERTIFICA: Con lista del Registro de Personas Jurídicas, sistema mecanizado número tres-ciento dos-ciento sesenta y nueve mil cuatrocientos sesenta y tres (1) Que se encuentre debidamente inscrita y vigente **INVERSIONES SAMEKH, LIMITADA**, cedula de persona jurídica número tres-ciento dos-ciento sesenta y nueve mil cuatrocientos sesenta y tres, con domicilio social en San José, San José, Costa Rica, en la Avenida Norte, Avenida Las Américas, Edificio Times Del Parque, Tercer Piso, GHF Abogados. Que su capital social es de CUATRO MIL COLONES representado por cuatro cuotas nominativas de mil colones cada una, íntegramente suscritas y pagadas. Que está en el Libro de Registro de Cuotistas que delidamente ingratulado que lleva la sociedad le da fe que las cuotas que compran el capital de la sociedad le pertenecen en su totalidad a SARAGOVIA OR INVESTMENTS, LLC, sociedad constituida y regida por las regulaciones del Estado de Florida, Estados Unidos de América, número de identificación L dos tres cero cero cero dos tres ocho ocho cinco tres, domiciliada en cuatro seis cinco uno Shendan Street, Suite trescientos dos Hollywood, FL tres tres cero dos uno. Asimismo, según consta en la documentación de dicha sociedad, la cual le merece fe, la totalidad de su capital social le pertenece a SARAGOVIA DO S MIL VEINTITRES FAMILY IRREVOCABLE TRUST Fideicomiso constituido, vigente y normado por las regulaciones de Estados Unidos de América, con número de identificación Tributaria noventa y tres- seis cuatro cero dos dos y tres, con domicilio con vista del contrato fiduciario, se da fe que dicho Fideicomiso tiene por única beneficiaria principal a MARTHA PRAGIER SARAGOVIA, titular de pasaporte de Estados Unidos de América número cuatro ochocientos ochocientos dos seis cero cuatro. Los asientos se han certificado en lo competente. Lo emitido no modifica, altera, condiciona, restringe ni desvirtúa lo transcritos en el presente documento.

ES CONFORME a esta fe presente
certificación número ciento uno- dos mil

TOBIAS FELIPE MURILLO JIMENEZ



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