

**2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L18000089902

**Entity Name:** COHAV, LLC

**Current Principal Place of Business:**

104 EGOZ STREET  
P BOX 28  
COHAV-YAIR, IS 44864-00

**Current Mailing Address:**

615 CAPE CORAL PARKWAY WEST  
CAPE CORAL, FL 33914 US

**FEI Number:** 82-5192252

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

ST. CLAIR, RONALD  
615 CAPE CORAL PARKWAY WEST  
CAPE CORAL, FL 33914 US

*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.*

**SIGNATURE:**

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title AMBR  
Name BAR-TAL, ILANA  
Address 104 EGOZ STREET, P BOX 28  
City-State-Zip: COHAV-YAIR IS 44864-00

Title AMBR  
Name BAR-TAL, EHUD  
Address 104 EGOZ STREET, P BOX 28  
City-State-Zip: COHAV-YAIR IS 44864-00

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** BAR-TAL ILANA

AMBR

01/09/2019

Electronic Signature of Signing Authorized Person(s) Detail

Date