

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L22000060981

**Entity Name:** A3 CHERRY LLC

**Current Principal Place of Business:**

1423 SE 10TH STREET  
SUITE 1  
CAPE CORAL, FL 33990

**Current Mailing Address:**

62 GALGAL HAMAALOT ST  
HOD HSHARON, 4536002 IL

**FEI Number:** 88-0825762

**Certificate of Status Desired:** No

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

KEDEM, ILAN  
1423 SE 10TH STREET  
SUITE 1  
CAPE CORAL, FL 33990 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 MGR  
Name KEDEM, ILAN  
Address 1423 SE 10TH STREET  
City-State-Zip: CAPE CORAL FL 33990

Title MGRM  
Name SHLOMI, AMICHAY  
Address 1423 SE 10TH STREET  
City-State-Zip: CAPE CORAL FL 33990

Title MGRM  
Name GOUR, NAVE JOSEF  
Address 1423 SE 10TH STREET  
City-State-Zip: CAPE CORAL FL 33990

Title AMBR  
Name ARIALY, NILLI  
Address 1423 SE 10TH STREET  
City-State-Zip: CAPE CORAL FL 33990

Title AMBR  
Name YONA, YONATAN  
Address 1423 SE 10TH STREET  
City-State-Zip: CAPE CORAL FL 33990

*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:** AMICHAY SHLOMI

**MGRM**

**03/08/2024**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date