



FILED  
NOVEMBER 19 2021  
OREGON SECRETARY OF STATE

## Corporation/Limited Liability Company - Information Change

In accordance with Oregon Revised Statute 192.410-192.490, the information on this application is public record. We must release this information to all parties upon request and it will be posted on our website.

**Documents are processed within 5-7 business days. If the filing is rejected, you will receive an email.**

**Registry Number**  
1880140-97

**Entity type**  
Foreign

**Business Type**  
Limited Liability Company

**Name of Limited Liability Company**  
A2Z Portland, a Florida limited liability company

## Information Update

**Business Activity**  
No

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**Principal Place of Business Address**  
No

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**Registered Agent or their address**  
No

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**Mailing Address where we send notices**  
No

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**Members or Managers**

Yes

**Name(s) and address(es) of LLC Members/Managers****Is this a Member or Manager?**

Manager

**Name of Member/Manager**

A2Z Investment Holdings, LLC, a Florida limited liability company

**Address**

1717 North Bayshore Drive, Suite 213, Miami, Florida 33132

**Is this a Member or Manager?**

Manager

**Name of Member/Manager**

Aydin Kharaghani

**Address**

1717 North Bayshore Drive, Suite 213, Miami, Florida 33132

**Do you have additional member/manager names and addresses to add? Please list whether the addition is a member/manager in the title field.**

Yes

**Is this a Member or Manager?**

Manager

**Name (of additional members/managers)**

Hussein Carmine Zayoun

**Address**

1717 North Bayshore Drive, Suite 213, Miami, Florida 33132

**Do you have additional names and addresses to add?**

Yes

**Is this a Member or Manager?**

Manager

**Name**

Junior Duperrier

**Address**

4513 Northeast 13 Avenue, Portland, Oregon 97211

EXECUTION: I declare as an authorized signer, under penalty of perjury, that this document does not fraudulently conceal, obscure, alter, or otherwise misrepresent the identity of any person including officers, directors, employees, members, managers or agents. This filing has been examined by me and is, to the best of my knowledge and belief, true, correct and complete. Making false statements in this document is against the law and may be penalized by fines, imprisonment, or both.

**Signature****Name**

Authorized Signor Joshua Berman

A handwritten signature in black ink, appearing to be 'JB', is positioned above a horizontal line.

**Contact name (to resolve questions with this filing)**

Joshua Berman

**Phone of person to contact to resolve questions with this filing.**

(305) 239-9437