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(((H22000263419 3)))



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Division of Corporations

Fax Number : (850) 617-6381

From:

Account Name : VCORP SERVICES, LLC

Account Number : 120080000067 Phone : (845)425-0077 Fax Number : (845)819-3588

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

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FLORIDA LIMITED LIABILITY CO.

Emerald Chicago Investors LLC

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August 5, 2022

FLORIDA DEPARTMENT OF STATE
Division of Corporations

VCORP SERVICES LLC

SUBJECT: EMERALD CHICAGO INVESTORS LLC

REF: W22000101634

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The registered agent designated must be an active Florida entity or a foreign entity authorized to transact business in Florida. Please correct the document.

If you have any further questions concerning your document, please call

Arcedra Johnson
REGULATORY SPECIALIST II
SRC

FAX Aud. #: E22000263419 Letter Number: 722A00017540

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Emerald Chicago Investors LLC

(Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:

Mailing Address:

777 Chestnut Ridge Road, Suite 301
Chestnut Ridge, NY 10977
Chestnut Ridge, NY 10977
Chestnut Ridge, NY 10977

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

The name and the Florida street address of the registered agent are:

Emerald Chicago LI	LC.	
	Name	
21073 Powerline Ro	L Unit 35	
Florida street addres	ss (P.O. Box <u>NOT</u> ac	cceptable)
Boca Raton	<u> </u>	33433
City	State	Zip

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 certificate. Thereby accept the appointment as registered agent and agree to act in this capacity. If further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S.

Mimi Sanik
Registered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

2022 AUG 30 AM 8: 03

"MGR	R" = Authorized ' = Manager	Member	Name and Address:		
AMBI			Moshe Wechsler 777 Chestnut Ridge Road, Suite Chestnut Ridge, NY 10977	c 301	
(Use at	tachment if neces	ssary)			
n effective d late of filing <u>e:</u> If the date	ate is listed, the) : inserted in this	date must be specific and	l cannot be more than five busin	ess days prior to or 90 o	he li ete d as
	ther provisions, i	-	records.	######################################	û AM 8: p
					_ _ =
REOU	IRED SIGNATI	URE:			

Filing Fees:

Typed or printed name of signee

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

S 5.00 Certificate of Status (Optional)

Moshe Wechsler