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(((H220000911073)))



H220000911073ABCW

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Tc:

Division of Corporations

Fax Number : (850) 617-6361

Prom:

Account Name : FILE RIGHT LLC
Account Number : 120170000091
Phone : (718)878-5611
Fax Number : (718)732-4580

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

Email Address:

FLORIDA LIMITED LIABILITY CO. 4200 POMPANO BEACH ALF LLC

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$125.00

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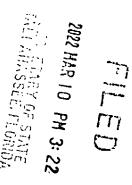
Fax Reference: H22000091107 3

Page: 2 of 4

COVER LETTER

CUD IF CT.	4200 POMPANO BEACH ALF LLC
SUBJECT:	Name of Limited Liability Company
The enclose	d Articles of Organization and fee(s) are submitted for filing.
Please retur	n all correspondence concerning this matter to the following:
	Name of Person
	FILE RIGHT LLC
	Firm/Company
	5314 16TH AVENUE SUITE 139
	Address
	BROOKLYN, NY 11204
s	City/State and Zip Code sales@fileacorp.com
_	E-mail address: (to be used for future annual report notification)
For further in	formation concerning this matter, please call:
	Sara 718 878-5811 at ()
-	Name of Person Area Code Daytime Telephone Number
Enclosed is	a check for the following amount:
\$125,00 Fil	S130.00 Filing Fee & S155 00 Filing Fee & Certificate of Status Certified Copy (additional copy is enclosed) S160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	MailingAddress StreetAddress

New Filing Section Division of Corporations P.O. Box 6327 Tallahassec, F1. 32314 New Filing Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301



Fax Reference: H22000091107 3

ARTICLESOF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

4200 POMPANO BEACH ALF LLC

(Must contain 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:

Mailing Address:
1270 S 13TH AVENUE
HOLLYWOOD, FLORIDA 33019

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.)

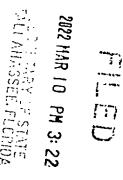
The name and the Florida street address of the registered agent are:

YOSEF GERSHOW!	ITZ	
	Name	
1270 S 13TH AVEN	UE	
Florida street address	s (P.O. Box <u>NOT</u> ac	cceptable)
HOLLYWOOD	FL	33019
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. I 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..

/	s / Yosef Gersho	witz	
Re	gistered Agent's Sign	nature (REQUIRED)	

(CONTINUED)



From: Mark Fuchs

Fax Reference: H22000091107 3

Title:	A set of Second Manuals on	Name and Address:
"AMBR = . "MGR" = M	Authorized Member	
MEMBER		YOSEF GERSHOWITZ 1270 S 13TH AVENUE
		HOLLYWOOD, FLORIDA 33019
		
		
		
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2022-03-10 16:41:48 GMT

\$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)

