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•	10.1	MJH
TRANSMIT	TAL LETTER	
FO: Registration Section Division of Corporations	9	W-2844) 00003474199: -11/22/0001041002 ******78.75 ******78.75
SUBJECT: Lev Benevolent Sc (Name of Corporation	ociety, Inc.	*****78.75 *****78.75
Dear Sir or Madam 00855 - 00/4	7-001247-	00071
The enclosed "Application by Foreign Not for Pro Affairs in Florida", "Certificate of Existence", and not for profit corporation to conduct its affairs in l	l check are submitted to re	
Please return all correspondence concerning this r	natter to the following:	
Jay Fox		
(Name	of Person)	
(Firm/	(Company)	
880 Third Avenue, 9th	Floor	وسي
(A	ddress)	r 10
New York, NY 10022	17:- 0-10	
(City/State	e and Zip Code)	24 PARE
For further information concerning this matter, plants	ease call:	FILED SLORITARY OF STATE VISION OF CORPORATIO OI JAN 24 AH 10: 37
Jay Foxa (Name of Person)	t (212) 319-06 (Area Code & Daytime	
	161 - 126 1 117	NTGG
STREET ADDRESS: Registration Section Division of Corporations 409 E. Gaines St. Tallahassee, FL 32399	MAILING ADDR Registration Section Division of Corpor P. O. Box 6327 Tallahassee, FL 3	on rations
Enclosed is a check for the following amount:		
□ \$70.00 Filing Fee □ \$78.75 Filing Fee & Certificate of Status	\$78.75 Filing Fee of Certified Copy	& □ \$87.50 Filing Fee, Certificate of Status & Certified Copy



FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

December 1, 2000

JAY FOX 880 THIRD AVENUE, 9TH FLOOR NEW YORK, NY 10022

SUBJECT: LEV BENEVOLENT SOCIETY, INC.

Ref. Number: W00000028441

We have received your document for LEV BENEVOLENT SOCIETY, INC. and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

You must list your Federal Employer Identification Number in the appropriate block. If applied for, enter "applied for", or if not applicable, enter "N/A".

The date first transacted business in Florida within the meaning of s. 607.1501 or 608.501, F.S., must be set forth in section 6 of the application. If the corporation/limited liability company has not yet transacted business in Florida within this meaning, please insert the words "upon qualification" in lieu of a date. (Note: Pursuant to s. 607.1502(4), F.S., this office collects a civil penalty of \$1000 for each year other than the application filing year, that a foreign corporation or limited liability company transacts business in this state without authority along with the past annual report/uniform business report fees due this office.)

The registered agent must sign accepting the designation.

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6967.

Michelle Hodges

Document Specialist

Letter Number: 900A00061130



FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

December 27, 2000

JAY FOX 880 THIRD AVENUE, 9TH FLOOR NEW YORK, NY 10022

SUBJECT: LEV BENEVOLENT SOCIETY, INC.

Ref. Number: W00000028441

We have received your document for LEV BENEVOLENT SOCIETY, INC. and your check(s) totaling \$78.75. However, the document has not been filed and is being retained in this office for the following:

You failed to make the correction(s) requested in our previous letter.

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6967.

Michelle Hodges Document Specialist

Letter Number: 700A00064594

-APPLICATION BY FOREIGN NOT FOR PROFIT CORPORATION FOR AUTHORIZATION TO CONDUCT ITS AFFAIRS IN FLORIDA

IN COMPLIANCE WITH SECTION 617.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN NOT FOR PROFIT CORPORATION FOR AUTHORIZATION TO CONDUCT ITS AFFAIRS IN THE STATE OF FLORIDA:

	evolent Society,	THC.			
Oleman - Carman	-tion, must include the word	"INCORPOR ATED	" or "CORPORATION	" or words or abbrevia	tions of like import
3-1	rill alandy indicate that it is a	comoration instead	of a natural person or i	parmership if not so co	ntained in the name
at present. "Cor	npany" or "Co." may not be	used as a corporate s	uffix by a nonprofit co	rporation.)	
•					
2. New Yor	₹ .	3	13 - 41415 (FEI num	06	<u> </u>
(State or count)	y under the law of which it is	incorporated)	(FEI num	ber, if applicable)	
(Other or comm	7	•			
4. October	27, 2000	5	Perpetual		
(Date of	Incorporation)		(Duration: Year co	orp. will cease to exist or	or "perpetual")
\	•				
6. Upon qu	alification				
(Dat	e corporation first conducted	Affairs in Florida - S	See sections 617.1501,	617.1502, and 817.155	$(\overline{F}.S.)$
(Dat	5 corporation inst compared				
0.441 77-		mfmiða DI 3	215/		
7. <u>9441 ha</u>	rding Avenue, Su	LISIUE, FII J	3134		
	(Pi	rincipal office addres	is)		
Current	mailing address	in New York	is c/o Jav I	Fox. 880 Thire	d Avenue,
Cultenc	marring address	urrent mailing addre	SS) Q+b F	loor, New Yor	k NY 10022
	•	•	3 011 - 1	-	
സ്റ കുടി	st persons with o	different re	ligious and e	ethnic backgro	oungs in
finding	hurial sites for	r deceased f	amily members	s and in conc.	luding
8. contrac	burial sites for tual arrangements	s with cemet	eries for bu	rial.	
(F	urpose(s) of corporation auth	iorized in home state	or country to be carrie	ed out in the state of Fic	onda)
,	• • •				~~
O Nome and str	<u>eet address</u> of Florida re	oistered agent: (F	O. Box or Mail Dro	p Box NOT acceptal	ble)
9. Name and <u>So</u>	eet address of Plotida le	Protot or manner /-			(도 됐듯
	Corporation Service Co	ompanv			2 9,5-
Name:	Corporation Service Co	ompany	-		JAN 24
Name:	Corporation Service Co	ompany	-	- ,	
		ompany	- ,.		
	Corporation Service Co	ompany			
		ompany			
	1201 Hays Street	ompany	- Florida ³²³⁰¹	 	ED STAIL OF
	1201 Hays Street		, Florida <u>32301</u>	(Zip Code)	ED STAIL OF
	1201 Hays Street		, Florida <u>32301</u>	(Zip Code)	
Office Address:	1201 Hays Street Tallahassee (City		, Florida <u>32301</u>	(Zip Code)	ED STAIL OF
Office Address:	Tallahassee (City)	,		FOR STATE GRAPORATIONS AM 10: 37
Office Address: 10. Registered	1201 Hays Street Tallahassee (City)	ee of process for the	above stated cornora	CAPORATIONS AN 10: 37 atton at the place
Office Address: 10. Registered Having been na	Tallahassee (City agent's acceptance: med as registered agent a	nd to accept service	ce of process for the	above stated corpore	ANIO: 37 ation at the place in this capacity. I
Office Address: 10. Registered Having been nadesignated in the	Tallahassee (City agent's acceptance: med as registered agent a is application, I hereby acceptance to the provision	nd to accept servic cept the appointm	ce of process for the tent as registered ag	above stated corpore ent and agree to act and complete perfor	ANIO: 37 ation at the place in this capacity. I
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Office Address: 10. Registered Having been nadesignated in the	Tallahassee (City agent's acceptance: med as registered agent a is application, I hereby ac comply with the provision a familiar with and accept	and to accept service the appointment of all statutes retained the obligations of the company	ce of process for the tent as registered ag clative to the proper	above stated corpore ent and agree to act and complete perfor	ANIO: 37 ANIO: 37 atton at the place in this capacity. I mance of my

11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

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10	Names	and	addresses	٥f	officers	and/or	directors:
IZ.	Names	anu	MUULESSES	U.	OFFICETS	anmor	mi ectors.

Chairman:	Jay Fox
Address:	880 Third Avenue, New York, NY 10022
Vice Chairman	Sara Berman
Address:	966A East 27th Street
	Brooklyn, NY 11210
Director:	Nataliya Yakubovich
Address:	2808 Brigham Street
	Brooklyn, NY 11235
Director:	
Address:	
	Jay Fox 880 Third Avenue, 9th Fl. New York, NY 10022
Address:	
Secretary:	Sara Berman
Address:	966A East 27th Street
Treasurer:	Brooklyn, NY 11210
Address:	
NOTE : If no	(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)
14.	Jay Fox, President (Typed or printed name and capacity of person signing application)

State of New York Department of State

I hereby certify, that the Certificate of Incorporation of LEV BENEVOLENT SOCIETY, INC. was filed on 10/27/2000, as a Not-for-Profit Corporation and that a diligent examination has been made of the Corporate index for documents filed with this Department for a certificate, order, or record of a dissolution, and upon such examination, no such certificate, order or record has been found, and that so far as indicated by the records of this Department, such corporation is a subsisting corporation.

Witness my hand and the official seal of the Department of State at the City of Albany, this 98th day of January two thousand and one.

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