

1/21/22, 11:46 AM

~~Division of Corporation~~

Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850)617-6383

From:

Account Name : Vcorp Services, LLC
Account Number : I20080000067
Phone : (845)425-0077
Fax Number : (845)818-3588

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

Email Address: _____

FOREIGN PROFIT/NONPROFIT CORPORATION

Cong. Yesocher Berish

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$70.00

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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Help

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:*

1. Cong. Yesocher Berish, Inc.
(Name of corporation: must include the word "INCORPORATED" or "CORPORATION" or words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of a natural person or partnership if not so contained in the name at present. "Company" or "Co." may not be used as a corporate suffix by a nonprofit corporation.)

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. New York 3. 20-5794104
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 10/30/2006 5. _____
(Date of Incorporation) (Date of duration, if other than perpetual)

6. _____
(Date first conducted affairs in Florida if prior to registration. See sections 617.1501 & 617.1502, F.S. to determine penalty liability.)

7. 20 Tokay Ln, Monsey, NY 10952
(Principal office street address)

(Current mailing address, if different)

8. To conduct and maintain a House of Worship in accordance with the traditions of the Orthodox Jewish faith
(Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida)

9. Name and street address of Florida registered agent: (P.O. Box **NOT** acceptable)

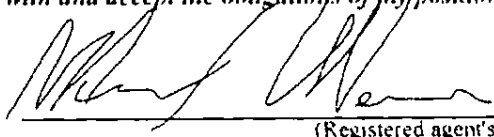
Name: Michael Weiser

Office Address: 313 Greenbrier C
West Palm Beach, Florida 33417
(City) (Zip Code)

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TALLAHASSEE, FLORIDA

10. Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.


(Registered agent's signature)

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.

12. For initial indexing purposes, list names, titles and addresses of the primary officers and/or directors [up to six (6) total]:

A. DIRECTORS

☐ Chairman Name: Michael Weiser
☐ Vice Chairman Address: 20 Tokay Ln
☒ Director 20 Tokay Ln Monsey, NY 10952
☐ President _____
☐ Vice President _____
☐ Secretary ☐ Treasurer
☐ Other: _____ ☐ Other: _____

☐ Chairman Name: David Itzkowitz
☐ Vice Chairman Address: 1862 62nd Street
☒ Director 1862 62nd Street Brooklyn, NY 11204
☐ President _____
☐ Vice President _____
☐ Secretary ☐ Treasurer
☐ Other: _____ ☐ Other: _____


☐ Chairman Name: Moshe Ostreicher
☐ Vice Chairman Address: 1857 61st St
☒ Director 1857 61st St Brooklyn, NY 11204
☐ President _____
☐ Vice President _____
☐ Secretary ☐ Treasurer
☐ Other: _____ ☐ Other: _____

☐ Chairman Name: _____
☐ Vice Chairman Address: _____
☐ Director _____
☐ President _____
☐ Vice President _____
☐ Secretary ☐ Treasurer
☐ Other: _____ ☐ Other: _____

☐ Chairman Name: _____
☐ Vice Chairman Address: _____
☐ Director _____
☐ President _____
☐ Vice President _____
☐ Secretary ☐ Treasurer
☐ Other: _____ ☐ Other: _____

☐ Chairman Name: _____
☐ Vice Chairman Address: _____
☐ Director _____
☐ President _____
☐ Vice President _____
☐ Secretary ☐ Treasurer
☐ Other: _____ ☐ Other: _____

NOTE: Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed individuals may be added to the index when filing your Florida Department of State Annual Report form.

13. 
 (Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. Moshe Ostreicher
 (Typed or printed name and capacity of person signing application)



DONNA G. SILBERMAN
County Clerk

**COUNTY OF ROCKLAND
OFFICE OF THE COUNTY CLERK**

1 SOUTH MAIN STREET - SUITE 100
NEW CITY, NEW YORK 10956-3549

Phone # (845) 638-5070

Fax # (845) 638-5647

Email : rocklandcountyclerk@co.rockland.ny.us

Website: rocklandcountyclerk.com

Deputy County Clerks
Janie Graham
Joseph Alongi
William Phillips

CERTIFICATE

I, Donna G. Silberman, County Clerk of the County of Rockland and also County Clerk of the County Court of said County, and the Supreme Court of said State,

Do hereby certify that I have searched the religious corporations records in this office and found CONG YESOCHER BERISH

was filed on OCTOBER 30, 2006 and that this corporation has not been discontinued or dissolved.

In witness whereof, I have huereunto set my hand and affixed the seal of said county, this 23RD of DECEMBER in the year 2021.

Very Truly Yours,

A handwritten signature in cursive script, appearing to read "Donna Silberman", is written over a horizontal line.

Donna G. Silberman
Rockland County Clerk