[960000004779

TO: Qualification/Registration Section Division of Corporations

SUBJECT: CHAGAD LUBAVITCH OF HAWAII, /NC.

400001949454 -09/17/96--01129--001 *****70.00 *****70.00

Dear Sir or Madam:

The enclosed "Application by Foreign Not for Profit Corporation for Authorization to Conduct its Affairs in Florida", "Certificate of Existence", and check are submitted to register the above referenced not for profit corporation to conducts its affairs in Florida.

Please return all correspondence concerning this matter to the following:

| RABBI TCHEL KRASNIANSKY | |
|---|------|
| CHABAD LUBAVITCH OF HAWAII, INC. | • |
| 845 22 AVENUE SE | 1/17 |
| HONOLULU, HI 96816 | |
| For further information concerning this matter, please call: | |
| RABBI TCHEL at (808) 735 - 8161 (Name of Person) Area Code & Daytime Telephone Number | |

COURIER ADDRESS:

Qualification/Tax Lien Section Division of Corporations 409 E. Gaines St. Tallahassee, FL 32399

MAILING ADDRESS:

Qualification/Tax Lien Section Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

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. CHADAD LUBAVITCH (Name of corporation: must include the word "INCORPORATED" abbreviations of like import in language as will clearly indicate that person or partnership if not so contained in the name at present. "Co corporate suffix by a nonprofit corporation.) | or "CORPORATION" or words or it is a corporation instead of a natural impany" or "Co." may not be used as a |
|--|--|
| 2. (State or country under the law of which it is incorporated) | ^ |
| 4. November 30, 1994 (Date of Incorporation) (Duri | PERPETUAL ntion: Year corp. will cease to exist or \$6 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 |
| 6. PON QUALIFICATION (Date corporation first conducted Affairs in Florida- See sections 617.1501, 617.1502, and 817.155, F.S.) | ntion: Year corp. will cease to exist or So Significant of Societation of Societa |
| 7. 845 22 DA AUE | <u> </u> |
| HONOLULU H 9 (Current mailing address) TO OPERATE AND CONDUCT 8. AND CHARITABLE ACTION (Purpose(s) of corporation authorized in home state or country to be | - EDUCATIONAL |
| 9. Name and street address of Florida registered agent | |
| EDDIE BRINK | MAN |
| 3162 NW 18 ^{TI} | * LANE |
| CORAL SPRINGS, Flor | ida 33065 (Zip Code) |
| 10. Registered agent's acceptance: Having been named as registered agent and to accept ser corporation at the place designated in this application, I registered agent and agree to act in this capacity. I furth of all statutes relative to the proper and complete perfort with and accept the obligations of my position as register | ner agree 10 comply with the provisions name of my duties, and I am familiar |

(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 Sceretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.
- 12. Names and addresses of officers and/or directors: (Street address only- P. O. Box NOT acceptable)
- A. DIRECTORS (Street address only- P. O. Box NOT acceptable)

| Chairman: RABBI ITCHEL KRASNJANSKY Address: 103 Klionioni PLACE Honolulu, HI 96814 | 05 SS 1 |
|--|--------------------|
| Vice Chairman: PEARL KRASNUANSKY | រ ក្នុង , ក្រុះ |
| Address: 103 Kilonioni PLACE | |
| H-ONDLULU, HI 96816 | |
| Director: JACQUES ELMALEH | ដីវ៉ |
| Address: 2134 KALAKAUA AVENUE | |
| HONOLULU, HI 96815 | |
| Director: | |
| Address: | |
| | |
| B.OFFICERS (Street address only- P. O. Box NOT acceptable) | |
| President: RABBI ITCHEL KRASNJANSKY | |
| Address: 103 KILONIONI PLACE | |
| HONOLULU, 141 96816 | |
| Vice President: FEARL KRASNJANSKY | |
| Address: 103 KIIONIONI PLACE | |
| HONOLULU, HI 96813 | |
| Secretary: TELSA QERNSTEIN | |
| Address: 1720 HUNA ST., HONOLULU, H196817 | |
| Treasurer: PEARL KRASNJANSKY | |
| Address: 103 KILONIONI PLACE | |
| HONOLULU, HI 96812 | _ |
| NOTE: If necessary, you may attach an addendum to the application listing additional officer and/or directors. | S |
| \mathcal{H}_{-} | |
| (Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application) | |
| RARBI ITCHEL KRASNIANSKY, PRESIDER | 31 |
| (Typed or printed name and capacity of person signing application) | |
| | |

State of Hawaii

Department of Commerce and Consumer Affairs

Honolulu

CERTIFICATE OF EXISTENCE

I, the undersigned Director of Commerce and Consumer Affairs of the State of Hawaii, do hereby certify that according to the records of this Department,

CHABAD LUBAVITCH OF HAWAII, INC.

was incorporated under the laws of the State of Hawaii of 11/30/1994 as a nonprofit corporation; and that the said corporation is still in existence.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the seal of the Department of Commerce and Consumer Affairs, at Honolulu, Hawaii.

Dated: 09/04/1996

Director of Commerce and Consumer Affairs

/ Commissioner of Securities

Y___

Eddie Brinkman

e-mill: a029032tarbefreenet.sefftn.lib.ff.us 1881 University Dr. #111

Coral Springs, El. 33071 Coral Springs, El. 30071 Coral Springs, El. 30

September 18, 1996

Division of Corporations PO Box 6327 Tallahassee, FL 32314 Attn: Annual Reports

RE: Doc # F96000004779

Chabad Lubavitch of Hawaii, Inc.

Please change my mailing address to:

1881 University Dr #111 Coral Springs, FL 33071

Sincerely,

Edelie Sunkman
Eddie Brinkman
Registered Agent

Chabad Lubavitch of Hawaii, Inc.

Xolly also