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Florida Department of State

Division of Corporations Public Access System

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(((H05000266928 3)))

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To:

Division of Corporations

Fax Number : (850)205-0383

From:

Account Name : HUBCO

Account Number : 104662003400

Phone

: (516)935-3940

Fax Number

: (516)935-3088

LIMITED LIABILITY COMPANY

H.S.F. LLC

| Certificate of Status | 1 |
|-----------------------|----------|
| Certified Copy | 0 |
| Page Count | 02 |
| Estimated Charge | \$130.00 |

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name

The name of the Limited Liability Company is: H.S.F. 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: | |
|-----------------------------|---------------|-------------------------------------|-----------------------|
| 2638 NW 64th Boulevard | | 2638 NW 64th Boulevard | <u></u> |
| Boca Raton, FL 33496 | | Boca Raton, FL 33496 | |
| ARTICLE III - Registered Ag | | fice & Registered Agent's Signature | DIVISION OS NOV |
| | Harvey Feinm | an - | 二号 |
| | | Name | 3 200 |
| | 2638 NW 64th | Boulevard | OF STATIONS AM 10: 40 |
| | (P.O. Box or | Mail Drop Box NOT Acceptable) | OF STATENS AM 10: 40 |
| | Boca Raton, F | L 33496 | • |
| | | (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, 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 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 608, F.S.

Registered Agent's Signature - Harvey Feinman

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| The name and address of each Man | or Managing Member(s): nager or Managing Member is as follows: |
|---|---|
| Title: "MGR" = Manager "MGRM" = Managing Member | Name and Address: |
| MGRM | Harvey Feinman-2638 NW 64th Boulevard, Boca Raton, FL 33496 |
| MGRM | Trudi Feinman- 2638 NW 64th Boulevard, Boca Raton, FL 33496 |
| | |
| (Use attachment if necessary) | |
| REQUIRED SIGNATURE: | |
| Signature | of a member or authorized representative of a member. |
| | nce with section 608.408(3), Florida Statutes, the execution of this constitutes an affirmation under the penalties of perjury that the facts in are true.) |
| | Harvey Feinman |
| | Typed or printed name of signee |