Electronic Articles of Organization For Florida Limited Liability Company

L19000056058 FILED 8:00 AM February 26, 2019 Sec. Of State bnmalchow

Article I

The name of the Limited Liability Company is: HOLOCAUST SURVIVORS LEGACY LLC

Article II

The street address of the principal office of the Limited Liability Company is:

7378 W ATLANTIC BLVD 104 MARGATE, FL. US 33063

The mailing address of the Limited Liability Company is:

7378 W ATLANTIC BLVD 104 MARGATE, FL. US 33063

Article III

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

SYLVIA KAHANA 7378 W ATLANTIC BLVD 104 MARGATE, FL. 33063

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.

Registered Agent Signature: SYLVIA KAHANA

Article IV

The name and address of person(s) authorized to manage LLC:

Title: MGR SYLVIA KAHANA 7378 W ATLANTIC BLVD STE 104 MARGATE, FL. 33063

Title: MGR SAUL DREIER 7378 W ATLANTIC BLVD STE 104 MARGATE, FL. 33063

Title: MGR DANIEL ENGL 7378 W ATLANTIC BLVD STE 104 MARGATE, FL. 33063

Title: MGR TONI GREENFIELD 7378 W ATLANTIC BLVD STE 104 MARGATE, FL. 33063

Signature of member or an authorized representative

Electronic Signature: SYLVIA KAHANA

I am the member or authorized representative submitting these Articles of Organization and affirm that the facts stated herein are true. I am aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S. I understand the requirement to file an annual report between January 1st and May 1st in the calendar year following formation of the LLC and every year thereafter to maintain "active" status.

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