Division of Corporations Electronic Filing Cover Sheet

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Ta:

Division of Corporations

: (BS0)617-6381 Fax Number

Account Name : FELDMAN & ASSOCIATES Account Number : 120136960018

(385)931-0433

Phone Fax Number : (866)856-1462

\*\*Enter the enail address for this business antity to be used for future annual report railings. Enter only one erail address please.\*\*

Emil Address: paul@feldmanclosings.com

## FLORIDA LIMITED LIABILITY CO.

Washington 26, LLC

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$125.00

Electronic Filing Menu

Corporate Filing Menu

Help

T. BURCH SEP - 1 2020

ARTICLE 1 - Name:

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

Washington 26, LI		<u> </u>			
(Must co	ntain the words "Limited L	iability Company,	E.L.C.," or "LLC.")		
ARTICLE II - Address:					
The mailing address and street	address of the principal of	Nice of the Limited	Liability Company is:		
<u>Princ</u>	ipal Office Address;		Mailing Address:		
122 GOLDEN BE.	ACH DRIVE		GOLDEN BEACH DRIVE		
GOLDEN BEACI	L EL 33160	<u>GOI</u>	DC): DC) CH C1 231/0		
ARTICLE III - Registered A The Limited Liability Compa	gent, Registered Office, only cannot serve as its own	& Registered Ager Registered Agent.	Ou must designate an individual or	2020 AUG Senel T	
ARTICLE III - Registered A The Limited Liability Compa nother business entity with a	gent, Registered Office, only cannot serve as its own in active Florida registration address of the registered	& Registered Agert. 'Registered Agent.'	t's Signature:  You must designate an individual or LASS	AUG 31	
ARTICLE III - Registered A The Limited Liability Compa another business entity with a	gent, Registered Office, only cannot serve as its own in active Florida registration	& Registered Agert. 'Registered Agent.'	t's Signature:  You must designate an individual or LASS	AUG 31	
ARTICLE III - Registered A The Limited Liability Compa another business entity with a	gent, Registered Office, only cannot serve as its own in active Florida registration address of the registered	& Registered Agent. You agent are:  P.A.  Name	t's Signature:  You must designate an individual or LASS	AUG 31	: : :
ARTICLE III - Registered A	gent, Registered Office, & ny cannot serve as its own a active Florida registration address of the registered PAUL FELDMAN, P	& Registered Agent. Segistered	t's Signature:  Ou must designate an individual or  AHASSEE, FLORID	AUG 31	:
ARTICLE III - Registered A The Limited Liability Compa another business entity with a	gent, Registered Office, only cannot serve as its own active Florida registration address of the registered  PAUL FELDMAN, P  2750 NE 185TH STR	& Registered Agent. Segistered	t's Signature:  You must designate an individual or LASS	AUG 31	:

Registered Agent's Signature (REQNIPED)

(CONTINUED)

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 Capte 605, IS

Title: "AMBR" = Authorized Memb "MGR" = Manager	Name and Address:	
MGR	YANIV SANANES	
<del></del>	122 Golden Beach Drive	_
	Golden Beach, FL 33160	3 2 3
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(Use attachment if necessary)		
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RTICLEV: Effective date, if other the fan effective date is listed, the date is educed the date of filing.)  ote: If the date inserted in this block	nust be specific and cannot be more than five husiness days prior to or 90 d does not meet the applicable statutory filing requirements, this date will not b epartment of State's records.	•
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RTICLEV: Effective date, if other the fan effective date is listed, the date is edate of filing.) ote: If the date inserted in this block is document's effective date on the D RTICLEVI: Other provisions, if any.  REQUIRED SIGNATURE:  Signature I am aware the constitutes a term.	does not meet the applicable statutory filing requirements, this date will not be epartment of State's records.  The of a member or an authorized representative of a member, and it is executed in accordance with section 605.0203 (1) (b), Florida Statutes, at any false information submitted in a document to the Department of State.	•

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)