Florida Department of State Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H20000346872 3)))



H200003468723ABC%

	Doing so will generate another cover sheet.	
To:		1
	Division of Corporations	ri,
	Fax Number : (850)617-6381	-
From:		•
=	Account Name : EXPRESS CORPORATE FILING SERVICE IN	ŀC.
	Account Number : I2000000146	
	Phone : (305)444-4994	
	Fax Number : (305)444-4977	
	the email address for this business entity to be used nual report mailings. Enter only one email address ple	
F	ail Address:	

FLORIDA PROFIT/NON PROFIT CORPORATION HOMESIDE FLORIDA LLC

Certificate of Status	0
Certified Copy	1
Page Count	04
Estimated Charge	\$78.75

2020 OCT -6 ATT 6: 3

*Articles of Organization

State of Florida Limited Liability Company Pursuant to Section 605.0201, Fla. Stat.:

Article I - NAME

Page 3 of 5

The name of the Limited Liability Company is as follows: HOMESIDE FLORIDA LLC

Article II - TYPE

The entity being formed is a Limited Liability Company.

Article III - ADDRESS

The street address (principal office address) for the Limited Liability Company are as follows:

Limited Liability Company Address:

333 LAS OLAS WAY SUITE 429 FORT LAUDERDALE, FL 33301

The mailing address for the limited liability company are the same.

Article IV - REGISTERED AGENT INFORMATION

The name and address of the registered agent are as follows:

Shaban Malik

3408 W 84th Street Suite 106 Hialeah, FL 33018

The street address and the mailing address of the registered agent are the same.

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, Shaban Malik, hereby accept the appointment as registered agent and consent 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 605 of the Florida Statutes.

Such Mr.

Signature of Registered Agent

Article V - STRUCTURE

This limited liability will have the following members and be member-managed:

MACKENZIE SEAMUS NAPURANO

1429 MONROE STREET HOLLYWOOD, FL 33020

Member-Manager

ARYEH EINHORN

3609 BEDFORD AVE BROOKLYN, NY 11210

Member-Manager

Article VI - EFFECTIVE DATE

The effective date of these Articles of Organization will be the date this document is filed with the Florida Division of Corporations.

EXECUTION

Signature of organizer:

And Me

Printed name of organizer:

SHABAN MALIK

Title of organizer:

CPA

Statement of signatory:

This document is executed in accordance with section 605.0203 (1) (b). Florida Statutes. I am aware that any 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.