1/25/2021

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Florida Department of State

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From:			<b>ૐ</b> ⊱
	Account Name	: C T CORPORATION SYSTEM	<b>5</b>
	Account Number	: FCA000000023	<b>&gt;</b>
	Phone	: (614)280-3338	

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. \*\*

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## FLORIDA LIMITED LIABILITY CO. Neshama BH LLC

## Certificate of Status Certified Copy 1 Page Count 03 Estimated Charge \$155.00

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T. BURCH JAN 26 2021

From: James Tanks III

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 - Name: The name of the Limited Liability Company is:				
NESHAMA BILLLC				
(Must contain the words "Limited Liebility (	Company, "L.U.C.," or "LLC.")	_		
ARTICLE II - Address: The mailing address and street address of the principal office of the	ee Limited Liability Company is:			
Principal Office Address:	Mading Address:			
800 SE 4TH AVENUE SUITE 704 HALLANDALL BEACH, FL 33009	\$00 SE 4111 AVENUE SUITE 704 HALLANDALL BEACH, FL 33009	-		
ARTICLE III - Registered Agent, Registered Office, & Register (The Limited Liability Company cannot serve as its own Registere another business entity with an active Florida registration.)	ered Agent's Signature: d Agent-You must designate an individual or	TAI S	202	
The name and the Florida street address of the registered agent are:	:	ECR!	<u></u> ,	ï
17FQUIII, FISCHER, CPA Name	The state of the s	SECRLIAN I ALLAHASSEI	MH 25	I
800 SE 4TH AVENUE, SUITE Florida street address (P.O. Roy		E FLOR	AH O	
HALLAS DALLE BEAUTH FL City State	3:009 Zip	ATC RIDA	ካካ ፡6	

Having been named as registered agent and to accept service of process for the above stated limited hability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I fin then 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 provincian in Chapter 605, F.S.

Regissered Spent's Signature (REQUIRED)

(CONTINUED)

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SEBASTIAN FRIEDMAN  800 SE 4TH AVENUE, SUITE 704 HALLANDALE BEACH, FL 33009  ASSEMBLY OF THE SUITE 704 ASSEMBLY OF THE SUI
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DA .
of filling:
nber or an authorized representative of a member. d in accordance with section 605.0203 (1) (b), Florida Statutes information submitted in a document to the Department of State felony as provided for in \$.817.155, F.S.  DIK, ATMOLIZED RODDAN HATN-C
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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)