

22000047724

Florida Department of State  
Division of Corporations  
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.

(((H22000051300 3)))



H220000513003ABCN

**Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page.**  
Doing so will generate another cover sheet.

To: Division of Corporations  
Fax Number : (850)617-6381

From: Account Name : USACORP INC.  
Account Number : I20130000019  
Phone : (718)362-4789  
Fax Number : (718)408-2550

FILED  
2022 FEB - 8 AM 9:23  
CLERK OF STATE

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

Email Address: mshpahomes@gmail.com

**FLORIDA LIMITED LIABILITY CO.**  
**Lemar Home ALF LLC**

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$125.00

Document Generated

Electronic Filing Menu

Corporate Filing Menu

Help

(((H22000051300 3)))

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

## ARTICLE I - Name:

The name of the Limited Liability Company is:

Lemar Home ALF LLC

(Must end with the words "Limited Liability Company, "L.L.C.," or "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:320 NW 183 St  
Miami, FL, 33169544 Park Ave, Unit 116  
Brooklyn, NY 11205

## ARTICLE III - Registered Agent, Registered Office, &amp; Registered Agent's Signature:

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

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

MS FL Homes LLC

Name

320 NW 183 StFlorida street address (P.O. Box **NOT** acceptable)MiamiFL33169

City

State

Zip

2022 FEB -8 AM 9:23  
CLERK OF STATE  
JANET M. GALT

FILED

*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 605, F.S.,*

/s/ Mordechai Schweid

Registered Agent's Signature (REQUIRED)

(CONTINUED)

(((H22000051300 3)))

**ARTICLE IV-**

**Title:**

AMBR

Miami, FL, 33169

Page 2 of 2

2022 FEB -8 90 23

after