5/9/22, 5:16 PM ida Department of

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.

(((H22000166922 3)))



H220001669223ABC/

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 : FILE IT USA INC. Account Number : I20190000121 Phone : (718)925-2025

Fax Number : (718)925-2027

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

SERVICE@FILEITUSA.COM Email Address:__

FLORIDA LIMITED LIABILITY CO.

Meohr Bais Yaakov LLC

| Certificate of Status | 0 |
|-----------------------|----------|
| Certified Copy | 0 |
| Page Count | 03 |
| Estimated Charge | \$125.00 |

S. CHATHAM MAY 11 2022

Electronic Filing Menu

Corporate Filing Menu

Help

17189252027

From: 17189252027 To: 18506176381

P: 2/3

(((H22000166922 3)))

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 - Name:

The name of the Limited Liability Company is:

Meohr Bais Yaakov LLC

(Must conatin 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:

| 1278 W 27th St | 1278 W 27th St | |
|-----------------------|-----------------------|--|
| Miami Beach, FL 33140 | Miami Beach, FL 33140 | |
| | | |

ARTICLE III - Registered Agent, Registered Office, & 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:

| Yonason Greenwald | i | , |
|----------------------|----------------------------|------------|
| | Name | |
| 1278 W 27th St | | |
| Florida street addre | ss (P.O. Box <u>NOT</u> ac | cceptable) |
| Miami Beach | FL | 33140 |
| City | State | Zip |

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/ Yonason Greenwald | |
|-----------------------------------------|--|
| Registered Agent's Signature (REQUIRED) | |

(CONTINUED)

22 MAY 10 AM 9: 10

(((H22000166922 3)))

| ARTI | L | 11/ |
|------|-------|-----|
| | | |

The name and address of each person authorized to manage and control the Limited Liability Company:

| Lille: | Name and Address: | | |
|-----------------------------------------------------|------------------------------------------------------------------------------------|--|--|
| "AMBR" = Authorized Member | | | |
| "MGR" = Manager | | | |
| AMBR | Zachania Gruenwald | | |
| AMDK | Zecharya Greenwald 1278 W 27th St | | |
| | Miami Beach, FL 33140 | | |
| | Milatili Deach, P.C. 33140 | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| (Use attachment if necessary) | | | |
| (| | | |
| APTICLE V. Effective data if other than the data | of filing: (OPTIONAL) | | |
| | | | |
| | ecific and cannot be more than five business days prior to or 90 days after | | |
| the date of filing.) | | | |
| Note: If the date inserted in this block does not r | neet the applicable statutory filing requirements, this date will not be listed as | | |
| the document's effective date on the Department | of State's records. | | |
| | | | |
| ARTICLE VI: Other provisions, if any. | | | |
| THE COME TO CHAIR PROTECTION OF THE COME. | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| REQUIRED SIGNATURE: | | | |
| | | | |
| | | | |

/s/ Zecharya Greenwald

Signature of a member or an authorized representative of a member.

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.

Zecharya Greenwald

Typed or printed name of signee

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)