

9/16/2022 14:30
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Division of Corporations
Florida Department of State
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To:
Division of Corporations
Fax Number : (850)617-6381

From:
Account Name : USACORP INC.
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****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: mullerzisha@gmail.com

2022 SEP 20 PM 3:12

FLORIDA LIMITED LIABILITY CO.

1029 NW Holdings LLC

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

2022 SEP 20 PM 12:35
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TALLAHASSEE, FLORIDA

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September 19, 2022

FLORIDA DEPARTMENT OF STATE
Division of Corporations

USACORP INC.

SUBJECT: 1029 HOLDINGS LLC
REF: W22000119000

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

One or more major words may be added to make the name distinguishable from the one presently on file.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Genesis R Kersey
OPS Clerk

FAX Aud. #: H22000321683
Letter Number: 122A00020827

22 SEP 20 PM 4:35
RECEIVED
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

((H22000321683 3)))

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

1029 NW Holdings 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:

3 Alpine Ct

Chestnut Ridge, NY 10977

3 Alpine Ct

Chestnut Ridge, NY 10977

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:

Levi Vogel

Name

9507 NW 38th Street

Florida street address (P.O. Box **NOT** acceptable)

Coral Springs

FL

33065

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/ Levi Vogel

Registered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

22 SEP 20 PM 12:35
FALLAH SEELI (MBA)
SECRETARY OF STATE
FLORIDA

ARTICLE IV-

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

Title:

"AMBR" = Authorized Member

"MGR" = Manager

AMBR

Name and Address:

Eluzer Halpert

5 Bonnie Ct

Spring Valley, NY 10977

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: _____ (OPTIONAL)

(If an effective date is listed, the date must be specific 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 meet 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.

REQUIRED SIGNATURE:

/S/ Eluzer Halpert

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.

Eluzer Halpert

Typed or printed name of signer

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)

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STATE OF FLORIDA
TALLAHASSEE, FLORIDA

\$125.00
\$ 30.00 C