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.

(((H23000015782 3)))



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To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : GERALD WEINBERG, P.C.

Account Number : I20030000043 Phone : (800)342-9856 Fax Number : (800)354-3381

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

	Address:				
rmanı	NUULES .				

FLORIDA LIMITED LIABILITY CO. HAPPY HOMES DELRAY BEACH LLC

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

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICIASOF	ORGANIZATIONFORFL	OKIDA DOM UZDEKA	BILLITCOMANT
ARTICLE I - Name: The name of the Limited Liability	y Company is:		
	HAPPY HOMES D	ELRAY BEACH LL	C
(Must conta	in the words "Limited Li	ability Company, "L.I	L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street ad	dress of the principal offi	ce of the Limited Lia	bility Company is:
<u>Princips</u>	l Office Address:		Mailing Address:
4149 BRANDON DR	IVE	2953 W	YNSUM AVENUE
DELRAY BEACH, F		MERRIC	CK. NY 11566
ARTICLE III - Registered Ages (The Limited Liability Company) another business entity with an ac-	cannot serve as its own R ctive Florida registration.	egistered Agent, You)	Signature: must designate an individual or
		=	
	ERIC GOLDSTEIN	Name	
	:	THE CONTRACTOR OF THE CONTRACT	
	4149 BRANDON DRI		11.
	Florida street address (P.O. Box <u>NOT</u> accep	table)
	DELRAY BEACH	FLORIDA	33445
	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| Eric Golds tein
Registered Agent's Signature (REQUIRED)

(CONTINUED)

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ARTICLE IV-

* Jan. 42. 2023 12:59FM (BEALD WEINSERS (H23000015782 31) (084 F. 3)

Title: "AMBR" = Authorized Memb	Name and Address:
"MGR" = Manager	
AMBR	ERIC GOLDSTEIN
	2953 WYNSUM AVENUE MERRICK, NY 11566
	the state of the s
(files areahuset if aspectary)	
(Use attachment if necessary)	(ODTIGO: 41)
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Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent \$ 30.00 Certified Copy (Optional)

S 5.00 Certificate of Status (Optional)

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