

L230000018088Florida Department of State
Division of Corporations
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To:

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

From:

Account Name : FELDMAN & ASSOCIATES
Account Number : 120130000018
Phone : (305)931-0433
Fax Number : (866)856-1462

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

Email Address: elevy@lawlp.com

FLORIDA LIMITED LIABILITY CO.

KKI Development, LLC

Certificate of Status	1
Certified Copy	0
Page Count	01
Estimated Charge	\$130.00

2023-01-17 21:04:27

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

KKL Development, LLC

(Must contain 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:

3230 Stirling Road, Suite 1,
Hollywood, FL 33021

3230 Stirling Road, Suite 1,
Hollywood, FL 33021

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:

Levy and Partners, PLLC

~~Not~~

3230 Stirling Road, Suite 1

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

Hollywood FL 33021

~~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.

Cly R. Levy

Registered Agent's Signature ~~(REQUIRED)~~

(CONTINUED)

ARTICLE IV-

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

Title:**Name and Address:**

"AMBR" = Authorized Member

"MGR" = Manager

MGR

Yaakov Klugmann

32 Cross Street, Suite 301

Lakewood, NJ 08701

Authorized Representati

Isaac Kasal

3230 Stirling Road, Suite 1

Hollywood, FL 33021

Authorized Representati

Ely R. Levy

3230 Stirling Road, Suite 1

Hollywood, FL 33021

(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:

Ely R. Levy

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.

Ely R. Levy

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)