# 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.

(((1123000339356.3)))



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

Fram:

Account Name : VCORP SERVICES, LLC

Account Number : I20080000067 : (845)425-0077 Phone Fax Number : (845)818-3588

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

Email Address:

# FLORIDA LIMITED LIABILITY CO.

# Kinyan FL4 LLC

Certificate of Status	
Certified Copy	0
Page Count	113
Estimated Charge	\$125.00

Electronic Filing Menu — Corporate Filing Menu

Help

ငှာ ၯၙ

### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

### ARTICLE 1 - Name:

The name of the Limited Liability Company is:

Kinyan FL4 LLC

(Must contain the words "Limited Liability Company, "L.L.C.," or "L.L.C.")

### ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

Page; 2 of 3

Princi	pal Office	Address:

Mailing Address:

18886118813

5225 Collins Ave #1501 5225 Coffins Ave #1501 Miami Beach, FL 33140 Minmi 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:

	מונה	
5225 Collins Ave #	1501	
Florida street addre	ss (P.O. Box <u>NOT</u> ac	(ceptable)
Miami Beach	FL	33140
Ċħ⁄	State	Zio

Having been named as registered agent and to accept service of process for the above stated limited hability company at the place designated in this certificate. Thereby accept the appointment as registered agent and agree to act in Fis aspacity. 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 Chiptir 605, ES



(CONTINUED)

AMBR.    Ezra limbanum   S228 Collins Ave #1501     Miami Beach, FL 3340     S228 Collins Ave #1501     Miami Beach, FL 3340     CILEV: Effective date, if other than the date of filing   (OPTIONAL)     effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days to of filing.)  If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be ficunent's effective date on the Department of State's records.  CLEVI: Other provisions, if any.    REOEIRED SIGNATURE:	Title: "AMBR" = Authorized Member "MGR" = Manager	Name and Address:		
(Use attachment if necessary)  (LEV: Effective date, if other than the date of filing:  (OPTIONAL)  (Iffective date, if other than the date of filing:  (OPTIONAL)  (OPTIONAL)  (OPTIONAL)  (Iffective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days to of filing).  If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be figured's effective date on the Department of State's records.  (ILEVI: Other provisions, if any.    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 ware that any lake information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155. F.S.    Exta Bimbaum   Typed or printed name of signe   Filing Fees;   S125.00 Filing Fee for Articles of Organization and Designation of Registered Agent   S 30.00 Certified Copy (Optional)	•	Care Blankson		
(Use attachment if necessary)  CLEV: Effective date, if other than the date of filing	AWIDK	5235 Collins Ave #1501		-
CLEV: Effective date, if other than the date of filing:		Miami Beach, FL 33140		-
CLEV: Effective date, if other than the date of filing:				
CLEV: Effective date, if other than the date of filing:				_
CLEV: Effective date, if other than the date of filing:				-
CLEV: Effective date, if other than the date of filing:				-
CLEV: Effective date, if other than the date of filing:				
CLEV: Effective date, if other than the date of filing:		****		-
CLEV: Effective date, if other than the date of filing:				-
CLEV: Effective date, if other than the date of filing:				
CLEV: Effective date, if other than the date of filing:				
CLEV: Effective date, if other than the date of filing:				_
CLEV: Effective date, if other than the date of filing:				-
CLEV: Effective date, if other than the date of filing:				
CLEV: Effective date, if other than the date of filing:				
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.  Ezra Bimbaum  Typed or printed name of signer  Filling Fees:  \$125,00 Filling Fee for Articles of Organization and Designation of Registered Agent \$30,00 Certified Copy (Optional)	ILEV: Effective date, if other than the date of effective date is listed, the date must be spec-	of filing: (OPTJO) ific and cannot be more than five business days pri	NAL) or to or 90	) days
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 talse information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817,155, F.S.  Ezra Bimbaum  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)	I.EV: Effective date, if other than the date of effective date is listed, the date must be specie of filing.) If the date inserted in this block does not many	rific and cannot be more than five business days pri set the applicable statutory filing requirements, this d	or to or 91	
This document is executed in accordance with section 605.0203 (1) (b). Florida Statutes. I am aware that any talse information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155. F.S.  Ezra Bimbaum  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)	ILEV: Effective date, if other than the date of effective date is listed, the date must be species of filing.)  If the date inserted in this block does not made unent's effective date on the Department of	rific and cannot be more than five business days pri set the applicable statutory filing requirements, this d	or to or 91	
This document is executed in accordance with section 605.0203 (1) (b). Florida Statutes. I am aware that any talse information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155. F.S.  Ezra Bimbaum  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)	T.E.V: Effective date, if other than the date of effective date is listed, the date must be specie of filing.)  If the date inserted in this block does not meature the date inserted at the Department of T.E.VI: Other provisions, if any,	rific and cannot be more than five business days pri set the applicable statutory filing requirements, this d	or to or 91	
Typed or printed name of signe  Filing Fees:  S125.00 Filing Fee for Articles of Organization and Designation of Registered Agent S 30.00 Certified Copy (Optional)	T.E.V: Effective date, if other than the date of effective date is listed, the date must be specie of filing.)  If the date inserted in this block does not meature the date inserted at the Department of T.E.VI: Other provisions, if any,	rific and cannot be more than five business days pri set the applicable statutory filing requirements, this d	or to or 91	
Filing Fees:  S125.00 Filing Fee for Articles of Organization and Designation of Registered Agent S 30.00 Certified Copy (Optional)	I.E.V: Effective date, if other than the date of effective date is listed, the date must be specified of filing.)  If the date inserted in this block does not meature it's effective date on the Department of I.E.VI: Other provisions, if any.  REOLIRED SIGNATURE:  Signature of a men This document is execute I am aware that any false it.	eet the applicable statutory filing requirements, this difference is records.  The property of a member of a membe	or to or 90 ate will no	
Filing Fees:  \$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent \$30.00 Certified Copy (Optional) \$5 5.00 Certificate of Status (Optional)	ILEV: Effective date, if other than the date of effective date is listed, the date must be specified filing.)  If the date inserted in this block does not meanment's effective date on the Department of ILEVI: Other provisions, if any,  REOURED SIGNATURE:  Signature of a men This document is execute I am aware that any false i constitutes a third degree	eet the applicable statutory filing requirements, this difficulties records.  Therefore an authorized representative of a member of in accordance with section 605,0203 (1) (b). Florid information submitted in a document to the Departme felony as provided for in 8,817,155, F.S.	or to or 90 ate will no	
S125.00 Filing Fee for Articles of Organization and Designation of Registered Agent S 30.00 Certified Copy (Optional) S 5.00 Certificate of Status (Optional)	ILEV: Effective date, if other than the date of effective date is listed, the date must be specified filing.)  If the date inserted in this block does not meanment's effective date on the Department of ILEVI: Other provisions, if any,  REOURED SIGNATURE:  Signature of a men This document is execute I am aware that any false i constitutes a third degree	eet the applicable statutory filing requirements, this difficulties records.  Therefore an authorized representative of a member of in accordance with section 605,0203 (1) (b). Florid information submitted in a document to the Departme felony as provided for in 8,817,155, F.S.	ate will no	t be fi
S 30.00 Certified Copy (Optional) S 5.00 Certificate of Status (Optional)	ILEV: Effective date, if other than the date of effective date is listed, the date must be specified filing.)  If the date inserted in this block does not meanment's effective date on the Department of ILEVI: Other provisions, if any,  REOURED SIGNATURE:  Signature of a men This document is execute I am aware that any false i constitutes a third degree	eet the applicable statutory filing requirements, this difficulties records.  Typed or printed name of signer.	ate will no	t be fi
S 5.00 Certificate of Status (Optional)	ILEV: Effective date, if other than the date of effective date is listed, the date must be specified filing.)  If the date inserted in this block does not meature the date inserted at the Department of ILEVI: Other provisions, if any,  REOURED SIGNATURE:  Signature of a mental may false if constitutes a third degree that any false if constitutes a third degree.	eet the applicable statutory filing requirements, this difficulties records.  Typed or printed name of signer  Filing Fees:	ate will no	t be fi
	ILEV: Effective date, if other than the date of effective date is listed, the date must be specified filing.)  If the date inserted in this block does not meanment's effective date on the Department of ILEVI: Other provisions, if any,  REOURED SIGNATURE:  Signature of a men This document is execute I am aware that any false is constitutes a third degree Ezra Bimbaum.  S125.00 Filing Fee for Articles of Org:	eet the applicable statutory filing requirements, this difficulties records.  Typed or printed name of signer  Filing Fees:	ate will no	t be fi
•	ILEV: Effective date, if other than the date of effective date is listed, the date must be specified of filing.)  If the date inserted in this block does not measurement's effective date on the Department of ILEVI: Other provisions, if any,  REOURED SIGNATURE:  Signature of a mentil this document is execute I am aware that any false is constitutes a third degree Ezra Bimbaum  S125.00 Filing Fee for Articles of Org: S 30.00 Certified Copy (Optional)	eet the applicable statutory filing requirements, this difficulties records.  Typed or printed name of signet  Filing Fees:  anization and Designation of Registered Agent	ate will no	t be fi
	ILEV: Effective date, if other than the date of effective date is listed, the date must be specified of filing.)  If the date inserted in this block does not measurement's effective date on the Department of ILEVI: Other provisions, if any,  REOURED SIGNATURE:  Signature of a mentil this document is execute I am aware that any false is constitutes a third degree Ezra Bimbaum  S125.00 Filing Fee for Articles of Org: S 30.00 Certified Copy (Optional)	eet the applicable statutory filing requirements, this difficulties records.  Typed or printed name of signet  Filing Fees:  anization and Designation of Registered Agent	ate will no	i he!