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15 DEC 28 AM 10:52

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15 DEC 28 AM 11:03
STATE OF FLORIDA
TALLAHASSEE, FLORIDA

DEC 29 2015

Y SULKER

CORPORATION SERVICE COMPANY
1201 Hays Street
Tallahassee, FL 32301
Phone: 850-558-1500

ACCOUNT NO. : I20000000195

REFERENCE : 922181 7532900

AUTHORIZATION :

COST LIMIT : \$125.00

ORDER DATE : December 22, 2015

ORDER TIME : 10:08 AM

ORDER NO. : 922181-005

CUSTOMER NO: 7532900

FOREIGN FILINGS

NAME: MAZEL DEVELOPERS GROUP LLC

XXXX QUALIFICATION (TYPE: LL)

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY
XX PLAIN STAMPED COPY
 CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Melissa Zender -- EXT# 62956

EXAMINER: _____

**APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS
IN FLORIDA**

IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. Mazel Developers Group LLC
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")
2. New York
(Jurisdiction under the law of which foreign limited liability company is organized)
3. 27-2511547
(FEI number, if applicable)
4. _____
(Date first transacted business in Florida, if prior to registration.)
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)
5. 101 West End Ave, suite 25H
New York, NY 10023
(Street Address of Principal Office)
6. 10278 Guatemala Street
Cooper City FL 33026
(Mailing Address)

7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: Sara Betzalel
Office Address: 10278 Guatemala Street
Cooper City, Florida 33026
(City) (Zip code)

Registered agent's acceptance:


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 application, 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 relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.


(Registered agent's signature)

8. The name, title or capacity and address of the person(s) who has/have authority to manage is/are:

Menachem Jakob, Mgr
101 West End Ave - suite 25H
New York, NY 10023

9. Attached is a certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted)


Signature of an authorized person

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.

MENACHEM JAKOB
Typed or printed name of signer

15 DEC 28 AM 11:03
DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

**State of New York
Department of State } ss:**

I hereby certify, that MAZEL DEVELOPERS GROUP LLC a NEW YORK Limited Liability Company filed Articles of Organization pursuant to the Limited Liability Company Law on 05/04/2010, and that the Limited Liability Company is existing so far as shown by the records of the Department.



*Witness my hand and the official seal
of the Department of State at the City
of Albany, this 23rd day of December
two thousand and fifteen.*

Anthony Giardina

Anthony Giardina
Executive Deputy Secretary of State