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From:

Account Name : ZVI RAFILOVICH, CPA, PA

Account Number : I20110000019 Phone : (954)921-0588 Fax Number : (954)921-4114

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## FLORIDA PROFIT/NON PROFIT CORPORATION BET ISRAEL OF COOPER CITY, INC.

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## **COVER LETTER**

Department of State Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

SUBJECT:	
	(PROPOSED CORPORATE NAME - MUST INCLUDE SUFFIX)

Enclosed is an original and one (1) copy of the Articles of Incorporation and a check for :

		I			
\$70.00 \$78.75 Filing Fee & Certificate of Status		□\$78.75 Filing Fee & Certified Copy	☐ \$87.50 Filing Fee, Certified Copy & Certificate		
		ADDITIONAL CO	ADDITIONAL COPY REQUIRED		

FROM:	ZVI RAFILOVICH, CPA, P.A.		
ricowi.	Name (Printed or typed)		
	2 S. UNIVERSITY DRIVE, SUITE 327		
	Address		
	PLANTATION, FLORIDA 33324		
	City, State & Zip		
	954-921-0588		
	Daytime Telephone number		
	ZVI@ZEECPA.COM		
1	E-mail address: (to be used for future annual report notification		

NOTE: Please provide the original and one copy of the articles.

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(H19000074381

ARTICLES OF INCORPORATION
In compliance with Chapter 617, F.S., (Not for Profit)

ARTICLE I The name of 0	NAME he corporation shall be:  BET ISRAEL OF	COOPER CITY, INC.
ARTICLE II	PRINCIPAL OFFICE	
115	Principal <u>street</u> address: 58 GORHAM DRIVE	Mailing address, if different is:
coc	OPER CITY, FLORIDA	
3302	26	
* -	for which the corporation is organized is:	This corporation is organized and operated exclusively as a social of its members and other nonprofit purposes within the meaning of
501(c)(7) of	the Internal Revenue Code of 1986 (a	as amended) or the corresponding provision of any future United
States intern	nal revenue law. The social and recre	ational facilities of this corporation shall not be made available to the
general publ	lic.	
PLEASE SE	E ADDITIONAL CLAUSES ATTACHI	ED.
ARTICLE V  Name and Titl  Address	INITIAL OFFICERS AND/OR DIRE  OZ RAV-ON, PRESIDENT  11558 GORHAM DRIVE  COOPER CITY, FLORIDA  33026	Name and Title:  Address:
stania a dimite		N. A. P. A.
Name and Titl		Name and Title:
Address		Address:
Name and Titl	le:	Name and Title:
Name and Titl Address	le:	

# (H19000074381 3)

Name and Trie	·	<ul> <li>Name and Title;</li> </ul>		<u></u>	
Address		_ Address: _			-
		 	·		
Name and Title:		Name and Title:		·	
Address _	·	_ Address: _	·		
-		, _ 			
ARTICLE VI	REGISTERED AGENT lorida street address (P.O. Box NOT acce;	and labert of the control			
Name:	ZVI RAFILOVICH, CP	A. P.A	med agent is:		
Address:	2 S. UNIVERSITY DR		327		
	PLANTATION, FL. 333	324			
(RTICLE VII The name and ad	INCORPORATOR  Idress of the Incorporator is:				
Name:	ZVI RAFILOVICH, CPA	4			
Address:	2 S. UNIVERSITY DR	IVE, STE	327		
	PLANTATION, FL. 333	<del></del>	•		
ffective date, if o	EFFECTIVE DATE: other than the date of filing: ate is listed, the date must be specific and	l caunot be more t	(OPTIONAL) han live days pric	or or 90 days after t	be filing.)
ete: If the date in secument's effection	inserted in this block does not meet the appive date on the Department of State's record	licable statutory El ds.	ing requirements, t	his date will not be li	isted as the
awing been nam	ed as registered agent to sceeps sorvice of uniliar with and accept the appointment as	f process for the al registered agent an	have stated corpore d agree to act in th	ation at the place de	signated in this
	Required Signature of Registered A		-	Date	79
ubmit this docum the Department f	went and affirm that the facts stated herein of State constitutes white degree felfiny as	are true. I an cover probided forfur s.8	we that any false is 17.155, F.S.	nformation subvitted	l in a document
	Required Signature of Incorpo	rator	-	3/1/19 Date	

p.5

### Article III - Additional Clauses

This corporation shall have an established membership of individuals, personal contacts and fellowship. The qualifications, privileges, and responsibilities of members shall be as provided in the bylaws of the corporation.

No part of the net income or net assets of the Corporation shall inure to the benefit of, or be distributable to, its directors, officers, members or other private persons. However, the Corporation is authorized to pay reasonable compensation for services actually rendered and to make payments and distributions in furtherance of its tax exempt purposes.

Upon dissolution or winding up of the Corporation, all of the business, properties, assets and income of the Corporation remaining after payment, or provision for payment, of all debts and liabilities of this Corporation, shall be distributed to a nonprofit fund, association, or corporation which is organized and operated exclusively for tax exempt purposes which are reasonable related to the purposes and goals of this Corporation, as may be determined by the Board of Directors of this Corporation in its sole discretion, and which has established its tax exempt status under § 501(C)(7) of the Internal Revenue Code of 1986, as amended.

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