

N20000009737

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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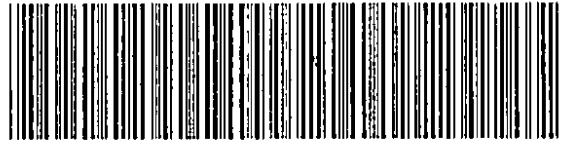
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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2008 AUG 27 PM 1:08
2008 AUG 27 AM 9:26
SECRETARY OF STATE
TALLAHASSEE, FL

N C
AUG



115 N CALHOUN ST., STE. 4
TALLAHASSEE, FL 32301
P: 866.625.0838
F: 866.625.0839
COGENCYGLOBAL.COM

Account#: 120000000088

Date: 08/26/2020

Name: Chris Vick

Reference #: 1258737

Entity Name: CHEVRA HATZALAH OF SOUTH FLORIDA, INC.

☒ Articles of Incorporation/Authorization to Transact Business

☐ Amendment

☐ Change of Agent

☐ Reinstatement

☐ Conversion

☐ Merger

☐ Dissolution/Withdrawal

☐ Fictitious Name

☒ Other CERTIFIED COPY UPON FILING

Authorized Amount: \$78.75

Signature:

✪ CORPORATE HQ
COGENCY GLOBAL INC.
10 E 40TH ST, 10TH FL
NY, NY 10016
D: +1.212.947.7200
P: 800.221.0102
F: 800.944.6607

✪ EUROPEAN HQ
COGENCY GLOBAL (UK) LIMITED
REGISTERED IN ENGLAND & WALES
REGISTRY #821072
6 LLOYDS AVE, UNIT 4CL
LONDON EC3N 3AX
+44 (0)20.3961.3080

✪ ASIA PACIFIC HQ
COGENCY GLOBAL (HK) LIMITED
A HONG KONG LIMITED COMPANY
UNIT B, 1/F, LIPPO LEIGHTON TOWER
103 LEIGHTON RD, CAUSEWAY BAY
HONG KONG
P: +852.2682.9633
F: +852.2682.9790

COVER LETTER

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

SUBJECT: CHEVRA HATZALAH OF SOUTH FLORIDA, INC.

(PROPOSED CORPORATE NAME – MUST INCLUDE SUFFIX)

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

☐ \$70.00
Filing Fee

☐ \$78.75
Filing Fee &
Certificate of
Status

☒ \$78.75
Filing Fee
& Certified Copy

☐ \$87.50
Filing Fee,
Certified Copy
& Certificate

ADDITIONAL COPY REQUIRED

FROM: NYISHA SHAKUR

Name (Printed or typed)

c/o MINTZ, LEVIN; 666 THIRD AVENUE

Address

NEW YORK, NY 10017

City, State & Zip

212-692-6728

Daytime Telephone number

nshakur@mintz.com

E-mail address: (to be used for future annual report notification)

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

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

FILED

2020 AUG 27 AM 9:26

ARTICLE I NAME
The name of the corporation shall be: CHEVRA HATZALAH OF SOUTH FLORIDA, INC.

SECRETARY OF STATE
TALLAHASSEE, FL

ARTICLE II PRINCIPAL OFFICE

Principal street address:
1070 McDONALD AVENUE

Mailing address, if different is:

BROOKLYN, NY 11230-2600

ARTICLE III PURPOSE

The purpose for which the corporation is organized is: VOLUNTEER FIRST RESPONDER AND AMBULANCE SERVICE

ARTICLE IV MANNER OF ELECTION The manner in which the directors are elected and appointed: Written Consent

ARTICLE V INITIAL OFFICERS AND/OR DIRECTORS

Name and Title:	<u>Isaac Stern, Director and President</u>	Name and Title:	<u>Jeffrey Moerdler, Director</u>
Address	<u>1407 48th STREET</u>	Address:	<u>c/o MINTZ, LEVIN</u>
	<u>BROOKLYN, NY 11219</u>		<u>666 THIRD AVENUE</u>
			<u>NEW YORK, NY 10017</u>
Name and Title:	<u>Zelig Gitelis, Director, VP, Treasurer</u>	Name and Title:	<u></u>
Address	<u>1319 E. 26th STREET</u>	Address:	<u></u>
	<u>BROOKLYN, NY 11210</u>		<u></u>
			<u></u>
Name and Title:	<u>David W. Shipper, Director</u>	Name and Title:	<u></u>
Address	<u>201 EAST 69th STREET</u>	Address:	<u></u>
	<u>NEW YORK, NY 10021</u>		<u></u>
			<u></u>

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

Name and Title: _____ Name and Title: _____

Address: _____ Address: _____

ARTICLE VI REGISTERED AGENT

The name and Florida street address (P.O. Box NOT acceptable) of the registered agent is:

Name: COGENCY GLOBAL INC.
Address: 115 NORTH CALHOUN STREET, SUITE 4
TALLAHASSEE, FL 32301

ARTICLE VII INCORPORATOR

The name and address of the Incorporator is:

Name: NYISHA SHAKUR
Address: c/o MINTZ, LEVIN; 666 THIRD AVENUE
NEW YORK, NY 10017

ARTICLE VIII EFFECTIVE DATE:

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 days prior or 90 days after the 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.

Having been named as registered agent to accept service of process for the above stated corporation at the place designated in this certificate, I am familiar with and accept the appointment as registered agent and agree to act in this capacity

Jahanna Norman - Assistant Secretary
Required Signature of Registered Agent

8/26/20
Date

I submit this document and affirm that the facts stated herein are true. 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.

Nyisha Shakur
Required Signature of Incorporator

8/21/20
Date

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SECRETARY OF STATE
TALLAHASSEE, FL