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2020 SEP -1 AM 8: 27 SECRETARY OF STATI



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

Account#: I20000000088

Date:	09/01/2020	
	Chris Vick	
Reference #:	4050505	
	HATZALAH	OF ORLANDO, INC.
✓ Article	s of Incorporation/Authorization	n to Transact Business
Amen	dment	
Chang	ge of Agent	
Reinst	tatement	
☐ Conve	ersion	
☐ Merge	ır	
Dissol	ution/Withdrawal	
☐ Fictitio	ous Name	
✓ Other	CERTIF	TED COPY UPON FILING
Authorized A Signature:	mount: \$78.75	

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F: 800.944.6607

F: +852.2682.9790

COVER LETTER

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

	(PROPOSED CORP	ORATE NAME – <u>MUST IN</u>	CLUDE SUFFIX)
osed is an original a	and one (1) copy of the Ar	ticles of Incorporation and	a check for :
□ \$70.00	□ \$78.75	=\$78.75	□ \$87.50
Filing Fee	Filing Fee &	Filing Fee	Filing Fee,
<u>8</u>	Certificate of	& Certified Copy	Certified Copy
	Status		& Certificate
		ADDITIONAL CO	
		ADDITIONAL CO	PY REQUIRED
ED OM:	NYISHA SHAKUR		
FROM:	Name (Printed or typed)		_
	MINTZ, LEVIN; 666 THIRI		
	Address		_
	NEW YORK, NY 10017		
	City, State & Zip		_

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

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



August 28, 2020

COGENCY

SUBJECT: HATZALAH OF ORLANDO, INC.

Ref. Number: W20000096848

We have received your document for HATZALAH OF ORLANDO, INC. and your check(s) totaling \$. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Neysa Culligan Regulatory Specialist II

2001 SEP -1 PH 12:

Letter Number: 420A00016522

ARTICLES OF INCORPORATION

FILED

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

2020 SEP -1 AM 8: 27

ARTICLE I. The name of th	• NAME e corporation shall be: HATZALAH OF C	RLANDO, INC.	100 SEF -1 AM 8: 27
	PRINCIPAL OFFICE		SECRETARY OF STATE TALLAHASSEE, FL
1070	Principal <u>street</u> address: McDONALD AVENUE		Mailing address, if different is:
BRO	OKLYN, NY 11230-2600		
The purpose fo	PURPOSE or which the corporation is organized is: R FIRST RESPONDER AND AMBULAN		
		.,	Written Consent
			rectors are elected and appointed: Written Consent
IRTICLE V	INITIAL OFFICERS AND/OR DIRECT	TORS	rectors are elected and appointed:
ARTICLE V	INITIAL OFFICERS AND/OR DIRECT	<i>TORS</i> Name and Title	e:
ARTICLE V	INITIAL OFFICERS AND/OR DIRECT Isaac Stern, Director and President	TORS	e:
I <i>RTICLE V</i> Name and Title	INITIAL OFFICERS AND/OR DIRECT Isaac Stern, Director and President 1407 48th STREET	<i>TORS</i> Name and Title	e:
ARTICLE V Name and Title	INITIAL OFFICERS AND/OR DIRECT Isaac Stern, Director and President 1407 48th STREET BROOKLYN, NY 11219 Zeliu Gitelis, Director, VR. Treasurer	<i>TORS</i> Name and Title Address:	e:
Address Name and Title	INITIAL OFFICERS AND/OR DIRECT Isaac Stern, Director and President 1407 48th STREET BROOKLYN, NY 11219 Zeliu Gitelis, Director, VR. Treasurer	TORS Name and Title Address: Name and Title	e: c/o MINTZ, LEVIN 666 THIRD AVENUE
Address Name and Title	INITIAL OFFICERS AND/OR DIRECT Isaac Stern, Director and President 1407 48th STREET BROOKLYN, NY 11219 Zelig Gitclis, Director, VP, Treasurer	<i>TORS</i> Name and Title Address:	e:
Name and Title Address Name and Title	Isaac Stern, Director and President 1407 48th STREET BROOKLYN, NY 11219 Zelig Gitclis, Director, VP, Treasurer 1319 E. 26th STREET BROOKLYN, NY 11210	TORS Name and Title Address: Name and Title Address: Address:	e:
Name and Title Address Name and Title	ISAAC Stern, Director and President 1407 48th STREET BROOKLYN, NY 11219 Zelig Gitclis, Director, VP, Treasurer 1319 E. 26th STREET BROOKLYN, NY 11210 David W. Shipper, Director 201 EAST 69th STREET	TORS Name and Title Address: Name and Title Address: Address:	e: Jeffrey Moerdler, Director c/o MINTZ, LEVIN 666 THIRD AVENUE NEW YORK, NY 10017

Name and Title:		Name and Title:			
Address _		Address:			
Name and Title:		Name and Title:			
Address _		Address:			
-					
-					
ARTICLE VI	REGISTERED AGENT				
The <u>name and F</u>	Torida street address (P.O. Box NOT accept	able) of the registered agent i	S:		
Name:	COGENCY GLOBAL INC.				
Address:	115 NORTH CALHOUN STREET, SU	ITE 4		SI	26
	TALLAHASSEE, FL 32301		17.	TCRE	33 SE
ARTICLE VII	INCORPORATOR		, , ,	ECRETARY OF STAT	2020 SEP -1
The <u>name and a</u>	ddress of the Incorporator is:		Ç	$h \leq 0$	>> i
Name:	NYISHA SHAKUR		ř	n m	- A 8:
Address:	c/o MINTZ, LEVIN; 666 THIRD AVE	NUE	- r	TATE	: 27
	NEW YORK, NY 10017			,.,	
ARTICLE VIII	EFFECTIVE DATE: Other than the date of filing:	(∩p:r:ı	ONAL		
(If an effective of	date is listed, the date must be specific and	cannot be more than five	days prior or 90 days after	r the fil	ling.)
	e inserted in this block does not meet the app ctive date on the Department of State's recor		rements, this date will not b	e listed	as the
	med as registered agent to accept service of familiar with and accept the appointment as			designa	ated in this
/s/ ER	IC HOOD, Assistant Secretary		8/26/20		
	Required Signature of Registered A	Agent	Date		
I submit this doc the Department o	ument and affirm that the facts stated herein of State constitutes a third degree felony as p	rovided for in s.817.155, F.S.	y false information submitted	d in a d	ocument to
	hypota Shar Required Signature of Incorp	lu	8/21/20		
	Required Signature of Incorp	orator	Date		_