

N2000009899

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

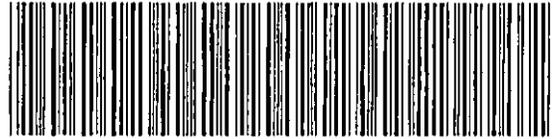
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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TALLAHASSEE, FL

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SECRETARY OF STATE  
TALLAHASSEE, FL



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

Account#: 120000000088

Date: 09/01/2020

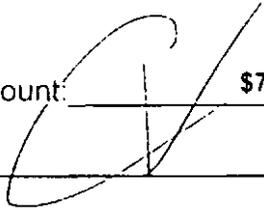
Name: Chris Vick

Reference #: 1258737

Entity Name: HATZOLAH OF ORLANDO, 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: 



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

August 28, 2020

COGENCYGLOBAL

SUBJECT: HATZOLAH OF ORLANDO, INC .  
Ref. Number: W20000096834

We have received your document for HATZOLAH 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

Letter Number: 220A00016519

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2020 SEP -1 PM 12: 51

## COVER LETTER

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

SUBJECT: HATZOLAH OF ORLANDO, 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)

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)

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ARTICLE I NAME

The name of the corporation shall be: HATZOLAH OF ORLANDO, 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: Isaac Stern, Director and President

Name and Title: Jeffrey Moerdler, Director

Address: 1407 48th STREET  
BROOKLYN, NY 11219

Address: c/o MINTZ, LEVIN  
666 THIRD AVENUE  
NEW YORK, NY 10017

Name and Title: Zelig Gitelis, Director, VP, Treasurer

Name and Title: \_\_\_\_\_

Address: 1319 E. 26th STREET  
BROOKLYN, NY 11210

Address: \_\_\_\_\_

Name and Title: David W. Shipper, Director

Name and Title: \_\_\_\_\_

Address: 201 EAST 69th STREET  
NEW YORK, NY 10021

Address: \_\_\_\_\_

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

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SECRETARY OF STATE  
TALLAHASSEE, FL

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**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:*

/s/ ERIC HOOD, Assistant Secretary

8/26/20

\_\_\_\_\_  
Required Signature of Registered Agent

\_\_\_\_\_  
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